

# WHITE CAPS

THE STORY  
OF NURSING

*by*

*Victor Robinson, M.D.*

AUTHOR OF

THE STORY OF MEDICINE



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*WHITE CAPS: The Story of Nursing*





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New People's Physician (8 vols.)	1941
Morals in Wartime	1943



# WHITE CAPS

## *THE STORY OF NURSING*

by Victor Robinson, M.D.

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## DEDICATION: TO THE NURSE

*You were a slave in Homer's time, and washing the feet of a wandering beggar who sat in the hall of Odysseus, you were the first to recognize the returned master by his scars when his own wife doubted. . . . In the harbor of Corinth on the Saronic gulf, where stood the pagan temple to Aphrodite, you were a Christian deaconess visiting the afflicted. . . . You were a cloistered nun in the Hôtel-Dieu of Paris, walking for centuries through endless corridors, serving countless patients for Christ's sake. . . . You were a king's daughter, and were married to a king by Anselm in Westminster Abbey, but you put a hair shirt on your queenly body and lovingly kissed the feet of lepers and dried their wounds with your hair and built a hospital for their comfort. . . . You were a Béguine of Flanders, and became known for your skillful ways with the sick. . . . You were a Daughter of St. Camillus, perishing with your Order when you went to the final plague in Barcelona. . . . You were a Sister of Charity of Vincent de Paul, all France was your hospital, and then your white cornettes were seen abroad. . . . You were a pauper in London town, heavy and filthy and drunken, and in the absence of other employment you became an asylum nurse, but as you could not read, you asked the lunatics to decipher the labels on the medicine bottles. . . . In the lost abyss of Scutari, you were the Lady-with-the-Lamp, and with the background of a vast cemetery for statistics your pity and your passion created Modern Nursing. . . . You were a modern girl, and you became a trained nurse for Humanity's sake. . . . In the zero hour of Democracy, you landed with the American troops, and giving sulfa drugs and plasma under fire, you died on the beach-head of Anzio. . . . You were a graduate of Lincoln Hospital, for your skin was colored, and in the European Theatre of Operations you cared tenderly for German prisoners of war. . . . You were an Hadassah nurse in Palestine, and refugee Jews from Poland and families of Arabs from the desert came to you for relief. . . . You served at Bataan, where you had little to give the soldiers except a smile, and when the Japanese bombers blew your hospital to pieces you escaped by Clipper to Australia. . . . Now the war is over, and peace has come again, but Mother Earth, sick and hungry and tired, awaits your healing hands. . . .*

V. R.





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# I N T R O D U C T I O N



The history of nursing is an episode in the history of woman. The entire history of nursing may be summed up in the statement: the nurse is the mirror in which is reflected the position of woman through the ages. Whether the highest attainment of woman was celibacy, or the goal of her existence was marriage, neither virgin nor matron was deemed capable of educational training. As the study of botany was considered inconsistent with female delicacy on the ground of stamens and pistils, woman could not with propriety follow an art in which she might discover that her patients, like the flowers, also possessed organs. Samuel Johnson (1709-84), although he had the advantage of knowing Mary Wollstonecraft, expressed the opinion of his time when he declared portrait painting to be an improper employment for women, as "staring in men's faces is very indelicate in a female"; this, too, militated against training women as nurses, who would undoubtedly scrutinize the masculine physiognomy from ear to ear.

The Presbyterian divine and pulpit orator, James Fordyce (1720-96), was the author of the often-reprinted and immensely popular *Sermons to Young Women* (1765). A copy of these sermons was once an inescapable gift for the young ladies of Great Britain. The moralist admonished them to cultivate a sickly delicacy: "Let it be observed that men of sensibility desire in every woman soft features and a flowing voice, a form not robust, and demeanor delicate and gentle." A nurse, however, must have health, and hence young ladies could not be nurses. The preacher instructed the female to behave to males "with more respectful observance and a more equal tenderness, studying their humors, overlooking their mistakes, submitting to their opinions . . . passing by little instances of unevenness, caprice or passion, giving soft answers to hasty words, complaining as seldom as possible, and making it your daily care to relieve their anxieties." After reading this passage, Mary Wollstonecraft said that such a woman must be an angel or an ass.



John Gregory (1724-73), professor of philosophy at Aberdeen, and later professor of medicine in Edinburgh, bequeathed to posterity *A Father's Legacy to his Daughters* (1774), which passed through many editions and numerous translations. This approved work on female propriety in the eighteenth century is a manual of dissimulation in the name of decorum. The philosopher-physician instructs the healthy girl to hide her health, "not to dance with spirit when gaiety of heart would make her feet eloquent." He instructs the wife to hide her love even from its legitimate object, "never to let her husband know the extent of her sensibility or affection." Above all, he instructs woman to hide her intelligence: "Be even cautious in displaying your good sense. It will be thought you assume a superiority over the rest of the company. But if you happen to have any learning, keep it a profound secret, especially from the men, who generally look with a jealous and malignant eye on a woman of great parts and a cultivated understanding." In an atmosphere where the male was obsessed with the problem of female morality, there was no space for trained nursing.

The polemic of Mary Wollstonecraft (1759-97), *A Vindication of the Rights of Woman* (1792), was a protest against woman as the plaything of man, an appeal for her status as a human being, an entreaty for her right to share the dignity of work: "But what have women to do in society (I may be asked) but to loiter with easy grace? Women might certainly study the art of healing, and be physicians as well as nurses. They might also study politics, and settle their benevolence on the broadest basis. Business of various kinds they might likewise pursue, if they were educated in a more orderly manner, which might save many from common and legal prostitution. How many women thus waste life away, the prey of discontent, who might have practised as physicians, regulated a farm, managed a shop, and stood erect, supported by their own industry, instead of hanging their heads surcharged with the dew of sensibility, that consumes the beauty to which it at first gave lustre—nay, I doubt whether pity and love are so near akin as poets feign, for I have seldom seen much compassion excited by the helplessness of females, unless they were fair; then, perhaps, pity was the soft handmaid of love, or the harbinger of lust! How much more respectable is the woman who earns her own bread by fulfilling any duty, than the most accomplished beauty!"

Until these truths had become self-evident, the trained nurse could not develop.

Sir James Crichton-Browne (1840-1938), with his lively face and snow-white Dundreary whiskers, was a familiar sight in Dumfries, Scotland, for he had practiced medicine for over seventy years, and was one of the sturdiest of nonagenarians. This post-Victorian author of *Victorian Jottings* (1926) had some strange recollections: he recalled that in his early days, when he had charge of an asylum (1865), the nurses in the wards could not read the labels on the medicine bottles, and asked the lunatics to decipher the directions for them. Not until years later (1874), did the hospitals of England begin to insist on nurses who were able to read and write. In those days, the hospital was both a dangerous house of refuge for the sick and destitute, who had nowhere else to go, and a dark harbor for the wreckage of womanhood, who could find no other employment than nursing.

Woman is an instinctive nurse, taught by Mother Nature. The nurse has always been a necessity, and thus lacked social status. In primitive times she was a slave, and in the civilized era a domestic. Overlooked in the plans of legislators, and forgotten in the curricula of pedagogues, she was left without protection and remained without education. She was not an artisan who could obtain the help of an hereditary guild; there was no Hanseatic League for nurses. Drawn from the nameless and numberless army of poverty, the nurse worked as a menial and obeyed as a servant. Denied the dignity of a trade, and devoid of professional ethics, she could not rise above the degradation of her environment. It never occurred to the Aristotles of the past that it would be safer for the public welfare if nurses were educated instead of lawyers. The untrained nurse is as old as the human race; the trained nurse is a recent discovery. The distinction between the two is a sharp commentary on the follies and prejudices of mankind.

V. R.





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*WHITE CAPS: The Story of Nursing*







# I

## Hospitals and Hospitality in Antiquity



THE HERITAGE OF HOSPITALITY. Primitive man regarded the stranger with a mixture of hostility and hospitality: the wayfarer who came over the river might be either a demon or a divinity. Fear of the foreigner blended with curiosity at the news he might bring: should he be slaughtered or ought he be sheltered? Members of primitive tribes knew nothing of the unity of the origin of mankind, for that remains an undiscovered secret; yet the relationship of host and guest developed in the remotest times. There were periods and places in which the chief of a tribe would have felt inhospitable if, after feeding a visitor, he had conducted him to a cheerless guestroom: the host sent one of his wives to sleep with the stranger. In the Heroic Age the host and guest relationship was more sacred than kinship. The lust to kill another race may be the most satisfying of atavistic emotions, and war may be the normal state of mankind; but there were always those who fed the hungry and clothed the naked, and ministered to the sick and wounded. The timeless spirit of nursing was expressed by Haldora of Iceland (A.D. 1000): "Come then, women of my household, now that the bloody battle is over, let us hasten to the fields and bind up the wounds of the warriors, friends and foes alike." As it was in the days of the arrow head, so is it in the days of the atom bomb.

HEBREW HOSPITALITY. Abraham, the archetype of the Hebrew, entertains three unknown men in his tent (Gen. 18:2-8); his kinsman Lot, who will not permit the visitors to Sodom to abide in the street all night, urges them to enter his house; and, rather than expose them to a threatening mob, he is ready to risk his own life and the honor of his virgin daughters (Gen. 19:1-10). These are the first instances in the Bible, followed by numerous others, of the sacred duty of hospitality to strangers and so-

journalers; the violation of hospitality by the sons of Belial occasioned a frightful civil war (Judg. 19:20). The afflicted Job, recounting his good deeds, does not fail to mention (Job 31:32): "The stranger did not lodge in the street: but I opened my doors to the traveller."

Three books in the Bible (Genesis, Judges, II Kings) afford the earliest information of ancient Hebrew hospitality: the host went out to meet the stranger on the way, and brought him into the house; the guest was given water to wash his feet, and a meal was placed before him, while the host's servants attended to his animals; only after the guest's first needs had been satisfied, did the host ask his name and the purpose of his journey; the guest was protected by the host as long as he remained under the shadow of his roof; the last meal was served just before leaving, and the host escorted the guest part of the distance; then the guest blessed his host and inquired what he needed (II Kings 4:13): "Behold, thou hast been careful for us with all this care; what is to be done for thee?"

**BIKKUR HOLIM.** The Hebrews, the ancient people who laid the foundations of public health on enduring principles, naturally regarded visiting the sick (*bikkur holim*) as a religious duty incumbent upon all. The supposition that God visited the aged Abraham, convalescing from his circumcision, is based on the statement (Gen. 18:1): "And the Lord appeared unto him in the plains of Mamre: and he sat in the tent door in the heat of the day." The Bible itself contains no positive instruction to visit the sick. In the Apocrypha are the words of Ben Sirach (Eccles. 7:35): "Fail not to be with them that weep, and mourn with them that mourn. Be not slow to visit the sick: for that shall make thee to be beloved." The Talmud is replete with references to visiting the sick.

**PUNDOK AND HEKDESH.** Nowhere in ancient literature is there a more gracious tribute to medical aid than in the words of Ben Sirach in the Apocrypha (Eccles. 38):

Honor a physician with the honor due unto him for the uses which ye may have of him: for the Lord hath created him. For of the most High cometh healing, and he shall receive honor of the king. The skill of the physician shall lift up his head: and in the sight of great men he shall be in admiration. The Lord hath created medicines out of the earth; and he that is wise will not abhor them. Was not the water made sweet with wood, that the virtue



thereof might be known? And he hath given men skill, that he might be honored in his marvellous works. With such doth he heal men, and taketh away their pains. Of such doth the apothecary make a confection; and of his works there is no end; and of him is peace over all the earth.

With the Hebrews, as among other primitive peoples, the house set apart, or house of separation (II Kings 15:5; II Chron. 26:21), preceded the hospital; here, too, arose from necessity the public inn on the high-road (*pundok*) and the sickhouse and home for the aged (*hekḏesh*). According to rabbinical lore, Abraham was the first who erected a tent hospice for the homeless and stricken, under the oak at Hebron and beneath the terebinth of Beersheba. It is of interest to note that Saint Jerome, exulting in the founding of the first public hospital in Rome, and the first inn for poor strangers in Ostia, writes to his disciple Oceanus (*Epistulae* lxxvii, 10): "A man and a woman contended for the privilege of setting up Abraham's tent (*tabernaculum*) in the harbor of Rome. . . . The whole world heard that a Home for Strangers (*xenodochium*) had been founded in the port of Rome, and Britain knew in the summer what Egypt and the Parthians had learned in the spring."

ESSENES. There was a sect among the Jews, numbering about four thousand men, dwelling chiefly in the neighborhood of the Dead Sea. They were mysterious men, whose monastic silence was unbroken by a single document from one of their initiates. The memory of the Essenes survives because of the zeal of Philo and Josephus, and the curiosity of the Roman Pliny, all of the first century. The earliest of these writers, Philo Judaeus of Alexandria, whose work is a blend of Hellenic and Hebraic philosophy, thus describes the Essenes:

Some cultivate the soil, others pursue peaceful arts, toiling only for the provision of their necessary wants. Among all men they alone are without money and without possession, but nevertheless they are the richest of all, because to have few wants and live frugally they regard as riches. Among them there is no maker of any weapon of war, nor any trader, whether huckster or dealer in large merchandise on land or sea, nor do they follow any occupation that leads to injustice or to covetousness. There is not a single slave among them, but they are all free, serving one another; they condemn masters, not only as representing a principle of unrighteousness in opposition to that of equality, but as personifications of wickedness in that they violate the law of nature, which made us all brethren, created alike.

Philo then describes their communism and their care of the sick:

No one possesses a house absolutely his own, one which does not at the same time belong to all; for in addition to living together in companies their houses are open also to their adherents coming from other quarters. They have one storehouse for all, and the same diet; their garments belong to all in common, and their meals are taken in common. . . . Whatever they receive for their wages after having worked the whole day they do not keep as their own, but bring into the common treasury for the use of all; nor do they neglect the sick who are unable to contribute their share, as they have in their treasury ample means to offer relief to those in need.

The majority of these people lived in Palestine and Syria, but a group of Essenes who settled on the shores of Lake Mareotis, south of Alexandria in Egypt, were called Therapeutae. The term "therapeutae" means attendants or physicians, but the origin of the name was unknown to Philo.

Pliny (*Historia naturalis* v, 17) was happy when he heard of this tribe of Judea, for it gave him another opportunity to relate something incredible:

The Esseni are a people that live apart from the world, more remarkable than any others on the whole earth, for they have no women among them; to sexual desire they are strangers; money they have none; the palm-trees are their only companions. Day after day, however, their numbers are fully recruited by multitudes of strangers that resort to them, driven thither to adopt their usages by the tempests of fortune, and wearied with the miseries of life. Thus it is, that through thousands of ages, incredible to relate, this people eternally prolongs its existence, without a single birth taking place there; so fruitful a source of population to it is that weariness of life which is felt by others.

The Essenes disappeared into history, but their epitaph is of hagiologic significance: Jewish communists, without interest in such primal passions as sex and war and trade, were the first to denounce slavery as contrary to the brotherhood of man; when one was sick, he was cured by medicine from the common stock, receiving the care of all.

BUDDHIST MERCY. When the Aryan tribes in the valley of the Ganges grew old (6th cent. B.C.), a certain weariness of life crept into their philosophy and people. The masses were narcotized to acceptance of their condition by their belief in the transmigration of souls: if they were doomed to servitude now, it was because they had sinned in a former birth; by good and obedient behavior, they would be rewarded in the next rebirth. The



pleasures of earthly existence were reserved only for those born into a certain sect. In the Himalayas-shaded palace of the powerful Suddhodana, chief of the Sakyas, lived in luxurious ease the young prince Gautama, happily married to his cousin, the beautiful Yasodhara. The parents of the young prince carefully shielded him from all knowledge of the miseries of life. One day, Gautama eluded the vigilance of his father's guards and escaped from the walls of the palace grounds to the world outside: here he found pain, sorrow, disease, old age, and death. Gautama renounced everything, and became a homeless wanderer to devote himself to the welfare of mankind.

One day, Gautama sat on the banks of the Neranjara, under the Bo tree at Buddh Gaya, eating the morning meal that a village girl had given him. The years of travel, study, and self-denial could be read on his face. He was alone in the world, for his most faithful disciples had forsaken him. Gautama wrestled with his soul, and descended into the darkness of doubt. He had learned the brevity of human happiness; he knew that all earthly good encloses within its core the seeds of grief; and he had conquered the personal craving for a future life. But, as he sat in solitude, he was overwhelmed by a vision of his dear home, his devoted relatives, and there awoke within him the instinctive yearning for pomp and power. The sun went down on his agony, and a new peace of understanding came to Gautama; he had achieved final emancipation from passion, anger, and delusion; the Bo tree at Buddh Gaya was the sacred tree of wisdom. Gautama had attained to Nirvana, and had become the Enlightened One, the Buddha (568-488 B.C.). He fasted under the tree "for seven times seven days and nights," attended by the archangel Brahma. Then Buddha journeyed through India, preaching his gospel and establishing a monastic system: he founded an order of monks, and later gave his blessing to an order of nuns.

Buddha did not invent the monastic way of life, but he popularized it among Oriental peoples. Among his disciples were princes, beggars, scholars, illiterates, physicians, barbers, poets, outcasts, outlaws, and saints. Oriental culture for centuries is largely Buddhistic culture. From the standpoint of ethics, philosophy, and rationalism, Buddhism was infinitely superior to the aggressive, war-making religions of later ages. With its democratic doctrine that "all men everywhere have equal rights,"



with its sympathetic compassion for universal suffering, Buddhism preached the gospel of sorrow for the sorrows of others, joy for the joys of others, equanimity for the disciple's own sorrows and joys, and love for all:

As a mother, even at the risk of her own life, protects her only son, so let him cultivate love towards the whole world—above, below, around—a heart of love unstinted, unmixed with the sense of differing or opposing interests. Let a man maintain this mindfulness all the while he is awake, whether he be standing, walking, sitting or lying down. This state of heart is the best in the world. . . . Our mind shall not waver. No evil speech will he utter. Tender and compassionate will he abide, loving in heart, void of malice within. And we will be ever suffusing such a one with the rays of our loving thought. And with that feeling as a basis we will ever be suffusing the whole wide world with thought of love far-reaching, grown great, beyond measure, void of anger or ill-will.

Let it be remembered that these sentiments are centuries pre-Christian.

ASOKA. The grandson of the founder of the Peacock Dynasty was Asoka (reigned 264-227 B.C.), who made Buddhism the state religion of India. Before Asoka abdicated as resplendent emperor to become a monk in a cave-cell, he had been the most original of the native rulers of India. Asoka has long been a patron saint of archaeologists because of his numerous rock-edicts and pillar-edicts which he published near pilgrim-visited shrines and on much-traveled roads. These carved-stone inscriptions are permanent records of Buddhist India. Asoka was an early builder of hospitals for man and beast in his native land; these animal hospitals throw light on the Hindu injunction that the physician should refuse aid and advice to criminals and to hunters who trap animals and ensnare birds. Other inscriptions of Asoka deal with the planting of medicinal herbs, which included the cultivation of healing drugs in foreign, allied kingdoms. Still other inscriptions tell of the planting of trees, the digging of wells, the creation of watering places, the erection of resthouses along the highways, the building of monasteries, the hewing of caves out of the reluctant rock for naked ascetics, and the supervision of alms. Asoka defied the ancient intolerance of his country when he stood forth as the solitary advocate of the education of women. The memory of the charity in the soul of Asoka, like that of the Buddha himself, lingers like the perfume of an eternal lotus flower.

CINGALESE HOSPITALS. According to Cingalese tradition, Mahinda, a son of Asoka, reached Ceylon by levitation; and by his presence and preaching converted the island to Buddhism (3rd cent. B.C.). A branch of the Bo tree, under which the wandering prince Gautama had become the Buddha, was transplanted at Anuradhapura where it has flourished ever since. Buddhist monasteries spread throughout the land, and at Kandy was built the famous Temple of the Sacred Tooth around what is said to have been a tooth of the Buddha; just as, in later ages, Christian monasteries boasted of relics of the saints—on occasion, more than one church or monastery has claimed to possess a relic of which, anatomically, there could not be more than one. The Buddhist scriptures of Ceylon, like those of India, are remarkable for their non-proselytizing tolerance, the beauty of their ethics, and their universal compassion.

Cingalese hospitals (437 B.C.) antedate the introduction of Buddhism into the island, though they multiplied under Buddhist influence which fostered the care of the sick. The Buddhists founded hospitals, medical consultation rooms, and drug centers; it was not science that urged them on, for they were innocent of it; they did it as part of their religious propaganda, and because of the mercy they felt in full measure. The chronicle of Ceylon (*Mahavansa*) relates that when the saint-king, Duttha Gamani, was on his deathbed (161 B.C.), his life-record was read to him, and he listened in contentment to these words: "I have daily maintained at eighteen different places, hospitals provided with suitable diet, and medicines prepared for the infirm."

ZEUS XENIOS AND JUPITER HOSPITALIS. As Zeus Xenios was the protector of strangers and suppliants, the primitive Greek considered hospitality a sacred duty, and reserved a section of his house with a separate entrance for wayfarers. This part of the house was the *hospitium* or *hospitalia*, and when he invited his guests to the table he became their *hospes* or host, his wife being *hospita* or hostess. The early Roman did likewise in the name of Jupiter Hospitalis, and in both Greece and Rome *hospitium privatum* or private hospitality evolved into *hospitium publicum* or public hospitality. From the Latin *hospitalis* (relating to a guest) stem such words in our language as hospital, hospice, hostel, hotel, and spital. Originally then, a hospital was a shelter for strangers, pil-



grims, and travelers—a place where guests were the recipients of hospitality.

ASCLEPIEION. The bearded Asklepios (Aesculapius), sorrowing over the ills of mankind, was a sympathetic god, yet he expelled from his temples the invalid departing from life and the woman bringing forth new life: neither death nor birth was permitted to desecrate the hallowed precincts of the healing shrine. Despite such violation of the most solemn functions of medicine by the god of medicine himself, the temples or hiera of Asklepios were hospitals. At nightfall, after the sacred lamps were extinguished in the abaton, the patients were ordered to sleep; moreover, some of the suppliants were bedridden. In these temples, the priest-physicians gave hygienic and dietetic instruction; prescribed baths, massage, exercise, and other forms of physiotherapy; administered hemlock juice, hellebore, squill, and other drugs; applied poultices and plasters during incubation; employed emetics, purges, bleeding; and when magic ritual and psychotherapy and medication did not suffice, they performed operations, as is shown by the surgical instruments on certain marble reliefs. During religious festivals, thousands of pilgrims visited these temples, which, because of their favorable locations, frequently developed into health resorts.

DEMOSIOS IATROS. The state physician, who undertook to render prompt and courteous aid to all classes of the population, including bondmen and resident aliens, was an institution in ancient Greece. In the *Acharnians* (l. 1030) of Aristophanes, when the pacifist of the play is annoyed by the persistent farmer who wants a peace-ointment rubbed on his eyes, he cries out in protest: "But, you rascal, I am not a public doctor; go and complain to Pittalus." Toward the end of the play (l. 1222), when the warrior Lamachus is struck through the bone by a lance, he exclaims to his attendants: "O bring this battered frame of mine to Pittalus." In other words, the public physician was such a well-known figure that reference to his functions could be understood by an audience attending the oldest Greek comedy that has survived (produced at the Lenaeon Dionysia, 425 B.C.).

IATREION. An Ionic vase-painting of the Hippocratic period (5th cent. B.C.) depicts a Greek physician in the center of six patients. It is a scene



which could have occurred either in a separate clinic or in the physician's private office. The seated physician, wearing a robe, in the manner prescribed in the Hippocratic treatise (*In the Iatreion* iii), and gracefully holding a lancet, is bleeding a patient from the median vein of the right arm into a capacious basin on the floor. Cupping vessels are hung on the wall. In front of the physician, another patient is waiting; he has a large staff in his right hand, and his left arm is bandaged in the area of the biceps. In back of him another patient is inhaling a flower, probably as a preventive against infection. A patient whose left leg is bandaged, stands directly behind the physician, watching the phlebotomy. Near him is a powerful-looking, achondroplastic dwarf, with a large hare slung over his left shoulder. The dwarf and a patient with a bandaged chest, leaning on a staff, are talking to each other.

The term *iatreion* was applied to the large, light and airy buildings in which the communal physicians practiced, and which thus served as city dispensaries or communal hospitals; it likewise was applied to a doctor's private office which at times fulfilled the functions of a sanatorium. In other words, the *iatreion* was the office of the physician, whether public or private; it was the place where the healer of antiquity held his consultations, kept his instruments and apparatus, dressed wounds, reduced luxations and fractures, and performed operations; there is a Hippocratic notebook on the subject, parts of which puzzled Galen and all future commentators, while other parts are remarkably modern. When an ancient Greek felt sick and said he was going to the *iatreion*, he meant the house of the physician; he did not mean, however, that part of the house where the physician lived with his family and assistants, but, rather, the part devoted to treatment, which consisted of a consultation room, an operating room, and sickrooms where the patient would be placed in bed if the doctor decided hospitalization was necessary.

XENODOCHION. There is a passage in Thucydides, in which the first scientific historian relates the destruction of Plataea by Sparta: the Lacedaemonians massacred all the men, except the traitors, and sold all the women into slavery; after erasing the city, they used the roofs and doors of the Plataeans, the articles of copper and iron, to build an inn two hundred feet square, with rooms all around a central court. This passage (iii, 68) is an epitome of human annals: a record of infamy, treachery,

cruelty, butchery; but it is a good deed to build an inn. History is a tale of the brutality of mankind; yet in ancient chronicles, thick with carnage, there was Homeric pity for the orphan (*Iliad* xxii, 490) and help for the crippled and aged; hospitality for the stranger and provender for his animals; relief for the poor and care of the sick. At the time that the city-states of Greece sought to obliterate each other in blood, Brotherhoods of Hospitality flourished. The ancient Hellenic *xenodochion* (from the Greek *xenos*, stranger), a lodging-house for strangers and an asylum for travelers, served at times as a form of the hospital of which it was the forerunner.

TESSERA HOSPITALIS. A pleasing aspect of ancient hospitium was an agreement to be friends, signified by dividing a tally or token (*tessera hospitalis*) which bore the image of Jupiter Hospitalis. The friends preserved the divided tessera hospitalis, for by it they could recognize each other in later years; it was passed on to their descendants, for the hospitality was hereditary, acknowledged by the posterity of the original friends. After such hospitality had once been established, it could not be renounced except by a formal declaration and the breaking of the tessera hospitalis into pieces. Although the tessera hospitalis was in force mainly during the Heroic Age of Greece, the chief references are Roman: Livy (xxv, 18), Cicero (*Actio in verrem* ii, 36), and especially Plautus (*Poenulus* v, 2, 87 ff.; *Cistellaria* ii, 1, 27).

ROMAN MILITARY HOSPITALS. The Ciceronian statement: "Recruits make shameful outcries over slight wounds, but the seasoned soldier merely looks round for a surgeon to apply the dressing," is evidence that Roman warriors were accustomed to military surgeons. Dioscorides, the father of materia medica, affectionately dedicating his work to Arieus, reminds him: "You know that I have led a soldier's life." No Roman military scene is more familiar than the first-aid station on Trajan's Column, depicting the bandaging of wounded soldiers. Galen, who had served as physician of the gladiators, refers to military surgeons and to surgeons of the fleet. The pillars erected soon after Galen's time, by the cohorts of the Vigiles, contain the names of several *medici*.

The old practice of billeting the sick and wounded troops in private houses must have been equally inconvenient to both citizens and soldiers,



and in time the practical Romans built military hospitals. The remains of such hospitals have been unearthed at Carnutum near Vindobona (Vienna), in Swiss Baden at Vindonissa (Windisch), and at Novaesium (Neuss). Often mentioned by Tacitus, Novaesium was the site of a large camp near the Roman-bridged Rhine. Excavations of these ruins have yielded the foundations of a military hospital on the corridor plan, with administration department, vestibule, refectory, and numerous wards still recognizable. Bronze needles, dilating instruments, and ointment boxes were among the medical relics. Dust and debris, translated by time into an archaeologist's delight, afforded a glimpse into the Roman invalid's dietary, for this rubbish pit contained a quantity of meat bones, eggshells and oystershells.

Tacitus (*Histories* i, 67), recounting the frightful calamities which a marauding Romano-Germanic army inflicted upon the unwarlike Helvetii, speaks of "a place that during the long peace had been built up into the semblance of a town and was much resorted to for its beauty and healthful waters." This is an early reference to Swiss Baden on the Limmat, whose hot sulphur springs are still famous in the treatment of gout and rheumatism. On numerous occasions, Roman relics have been found in the gardens of the Kursaal. In near-by Vindonissa a catheter, a scalpel, and a probe were picked up: these surgical instruments were archaeological hints to dig deeper. Below the surface lay vases, pots, lamps, tiles, weavers' weights, knives, and spearheads. A modern shovel clanged against coins from the reigns of Claudius, Nero, Domitian, Vespasian, and Hadrian. At a depth of two meters, surgical instruments made their appearance: needles, earscoops, cauteries, a broken catheter—catheters are always breaking—spatulae and unguentaria, spoons of bone and bronze, and scores of probes. More than instruments were unearthed by the pickax and spade: there was revealed to the Swiss diggers the remains of a Roman military hospital with fourteen rooms.

HOUSE OF THE PHYSICIAN. The city of Pompeii died suddenly (A.D. 79): many centuries later the fatal Vesuvian blanket was lifted, revealing to modern eyes the structure of an ancient community. The ruins of columned temples, and the silent lupanar with its obscene paintings, still stand; in the house of Meleager a mischievous satyr still startles a bacchante with a snake, and in the backroom of a tavern, a Roman soldier



is still being served; here were found, where they had fallen, a homeowner with a key in his hand, a young girl with a ring on her finger, and a dog in a twisted position; death overtook the gladiators in their prison, and children running in the garden. In the Strada del Consulare is the House of the Physician: the massiveness of its limestone blocks, the number of its small rooms, the large room reaching from the street to the back of the building, the remarkable variety and duplication of the surgical instruments discovered in one place, all indicate that the House of the Physician was not the private office of a practitioner, but a Pompeian hospital. Information concerning the character of the hospital was obliterated by the volcano; the surgical instruments have long enriched the Museum of Naples and have frequently been studied by medical scholars.

VALETUDINARIUM. It has long been assumed that the valetudinaria of the Romans were for sick slaves only, and that their motivation was not so much the relief of the ailing bondman as the restoration of the property of the master. No one will accuse the ancient Romans of tender hearts, but it becomes plain from the literature that the foremost citizens were themselves familiar with the valetudinaria. Celsus (*De medicina*, Prooemium 65), in discussing various physicians, speaks of "those who take charge of large hospitals, because they cannot pay full attention to individuals." The expression which Celsus uses is significant, for the Romans were accustomed to enormous buildings, and the emphasis on *ampla valetudinaria*, is evidence that they were large indeed.

Seneca (*Epistles* xxii), in writing to his dear friend Lucilius, remarks: "No, I am not so shameless as to undertake to cure my fellowmen when I am ill myself. Let us, however, discuss our common woe as if we lay together in the same valetudinarium." If the valetudinarium had been limited to slave-patients, it would hardly have occurred to the aristocratic Seneca to mention this institution in so intimate a manner, especially as he was addressing a Roman knight who, at the time of the correspondence, was procurator in Sicily.

In the time of Tacitus, the valetudinarium was so well known that the historian drags it into a passage (*Dialogus* 21) without necessity:

I make the frank avowal that with some of the ancients I can scarcely keep from laughing, while with others I can scarcely keep awake. And I am not

going to name anyone belonging to the rank and file, a Canutius or an Attius, not to mention Furnius and Toranius, and all the others who, being inmates of the same hospital (*in eodem valetudinario*), have nothing but approval for the familiar skin and bones.

COMMENTARY. It is a widespread opinion, shared even by historians, that the hospital is a Christian invention. This is true to the extent that the rise of Christianity gave an onward impulse to charity and the care of the sick, as admitted by Julian the Apostate in his epistle to Arsacius, but the assertion that the first hospitals in history were Christian hospitals is entirely erroneous. Saint Jerome's epistle to Oceanus is usually quoted as the authority for this claim, yet the internal evidence of the letter itself furnishes sufficient confutation. Jerome's Latin letter contains one word from an older culture, but that solitary Greek word is significant: it is the word *nosocomion* (to take care of disease), which the Romans Latinized into *nosocomium*. Since this word means a hospital or infirmary, and has no other meaning, it is plain that the Greeks had a word for hospital or infirmary, and that Jerome utilized it. Therefore, the hospital which Jerome's Fabiola founded in Rome must have been preceded by Greek hospitals elsewhere, and Jerome does not claim that Fabiola's hospital was the first even in Rome.

The Hindu hospitals described in the ancient text of Charaka-Samhita, and on the rock-inscriptions of Asoka, are indelible; the record of hospitals and attendants in the Cingalese chronicle cannot be obliterated; the ruins of the hospitals of Epidarus and Athens are mutely eloquent; the references by Celsus, Seneca, and Columbella to Roman hospitals are obvious. If then it is asked why more is not known of the hospitals of antiquity, the question is readily answered. It need only be remembered that among the early official acts of victorious Christianity was the suppression of the pagan hospitals: Asclepieia, iatreia, and valetudinaria were destroyed by decree of Constantine (A.D. 335). One does not abolish what does not exist, and a decree is not issued against institutions unless they are sufficiently conspicuous to attract attention. Constantine closed the pagan hospitals throughout his empire for the same reason that Justinian, at a later date, closed the schools of Athens.

CONCLUSIONS. The memorials of mankind are chronicles of plunder and murder. Stele and obelisk and triumphal arch repeat the story: fraud and

throatcutting are the roads to power. Chapter follows chapter, with the monster on the throne. As it was in the beginning, so is it today: history is written with the sword. The pages are indeed crimson, yet there are footnotes of a different hue. Charity is older than the most primitive of the pyramids. Before the first cuneiform letters were impressed on clay, a bridge had been built over a river for the traveler, and on the highroad had been erected a hospice for the stranger. The early hospital, if only a tent, a hut, or a shelter of boughs, was the blastoderm from which has evolved the hospital system. To no one race, to no single creed, belongs the discovery of compassion. The Hebraic exhortation (Lev. 19:18), "Thou shalt love thy neighbour as thyself," is supplemented by the dictum of the Hippocratic physician (*Precepts* vi), "For where there is love of man, there is also love of the art." These are pagan thoughts, written centuries before Christianity, but they could be inscribed, with appropriateness, on the portals of every hospital of our time.





### HEAD OF HYGEIA

Head of Hygieia, Goddess of Health, found at Tegea; stolen from that museum, and found four years later hidden in a barn; now in the National Museum at Athens, Greece.—Photograph by the Author.





Nurse feeding a sick man. From a rare Medieval manuscript: *Sixth Work of Charity*. Alsatian, c. 1450.



A nun member of the Knights Hospitallers. The nuns of this Order distinguished themselves as nurses in the Hospital of St. John of Jerusalem during the Crusades.



A nurse nun of the Premonstratensian Order.



Early illumination showing Galen, the Greek physician, dictating a case history at the bedside. From the so-called Dresden Manuscript. All pictures from The Bettmann Archive.





*Author's Collection*

ST. VINCENT DE PAUL  
from the painting by Henri Philippoteaux (1815-84).





*The Bettmann Archive*

Florence Nightingale at the Hospital of Scutari, 1855.



*The Bettmann Archive*

The Battle of Solferino, 1859, which induced Jean Henry Dunant to found the Red Cross.





*The Bettmann Archive*

Shell bursting in a Union Hospital during the Civil War. From Mrs. Mary Livermore's *My Story of the War* (Hartford, 1888).



*The Bettmann Archive*

Children's Christmas party in the London Hospital.  
A painting by Lucien Davis, 1898.





*The Bettmann Archive*

CLARA BARTON  
Scene from the Franco-Prussian War (1870-71)





*The Bettmann Archive*

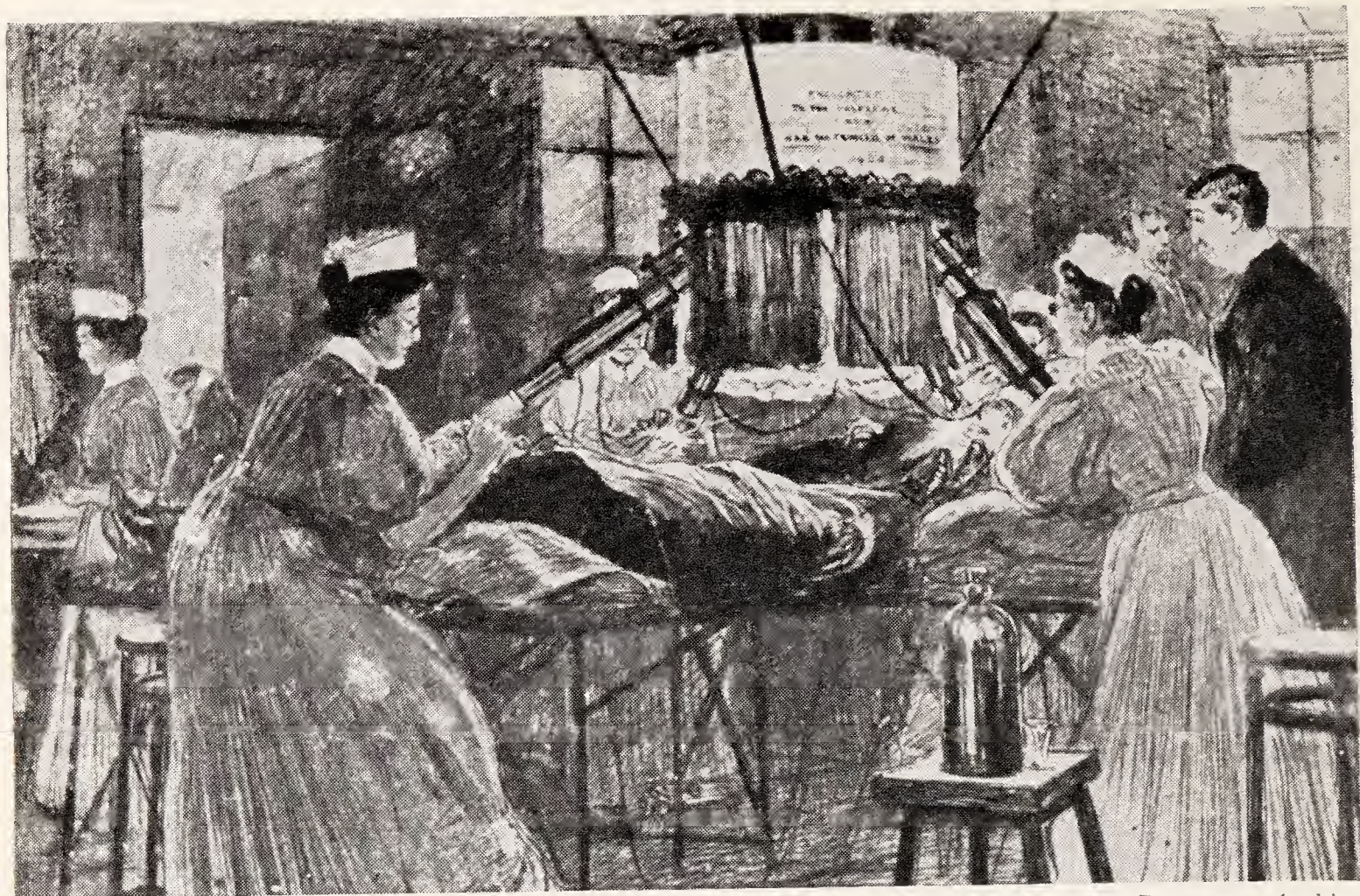
Lecture on bandaging at the Blockley Training School for Nurses, 1886.



*The Bettmann Archive*

Inoculating a child against diphtheria in a Paris hospital.





*The Bettmann Archive*

In the London Hospital. The Finsen Light Cure.



*The Bettmann Archive*

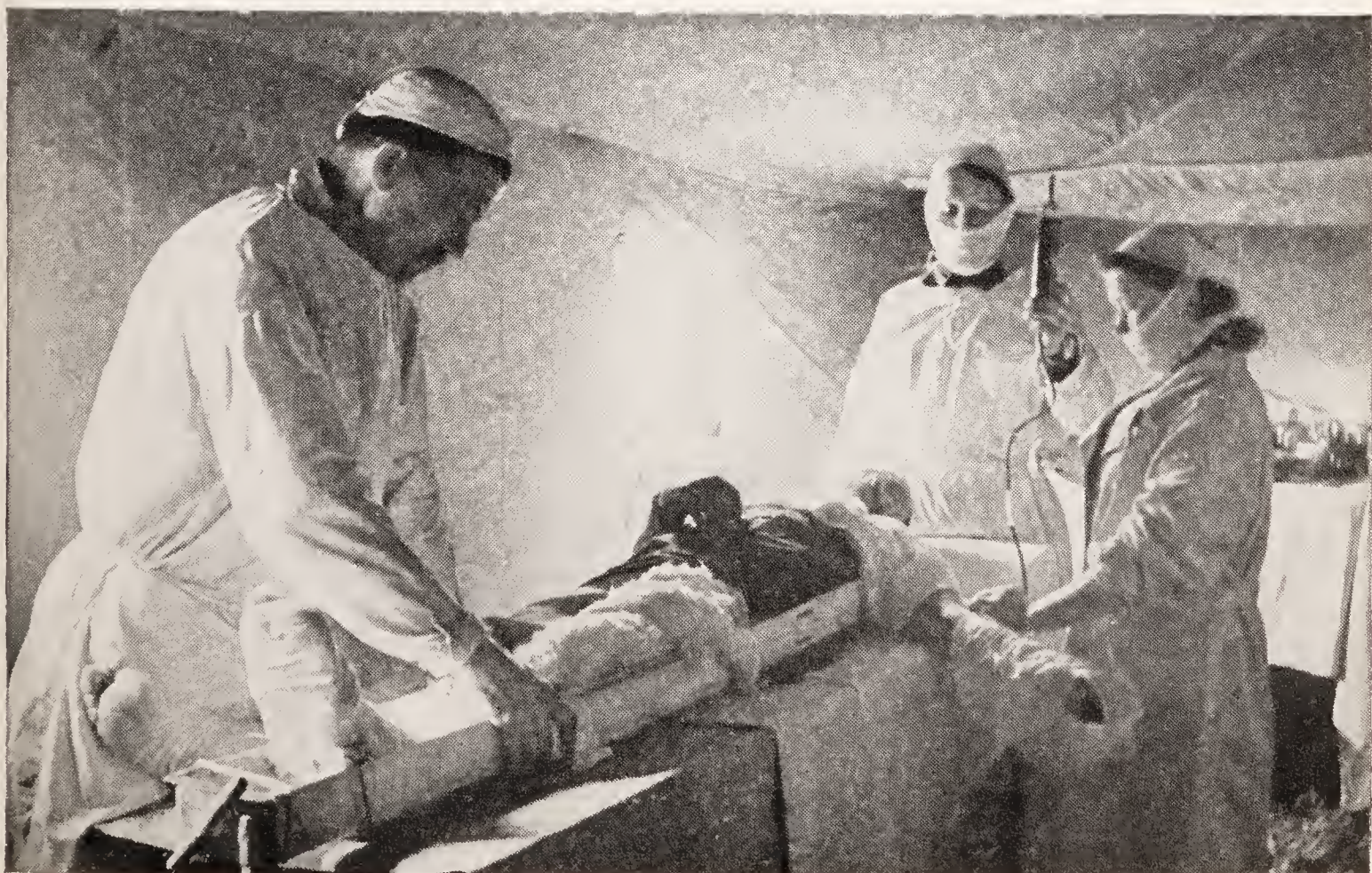
A bedside consultation, with student nurses and internes observing.  
Bellevue Hospital, 1892.





*The Bettmann Archive*

World War I. Field hospital in France. Photo in the Army Medical Museum, Washington, D. C.



*Sovfoto*

World War II. Medical service in the forward lines of the Red Army.





*Author's Collection*

### EDITH CAVELL

As dawn broke on October 12, 1940, nurses of the London Hospital placed their tribute of remembrance at the base of the statue of Edith Cavell in Charing Cross Road. From: 200th Birthday Souvenir Edition of London Hospital Illustrated.





*Sovfoto*

Soviet Field Nurse Raisa Trojan rendered first aid to 120 men on the battlefield, in one sector dragging 15 seriously wounded men from a blazing house.



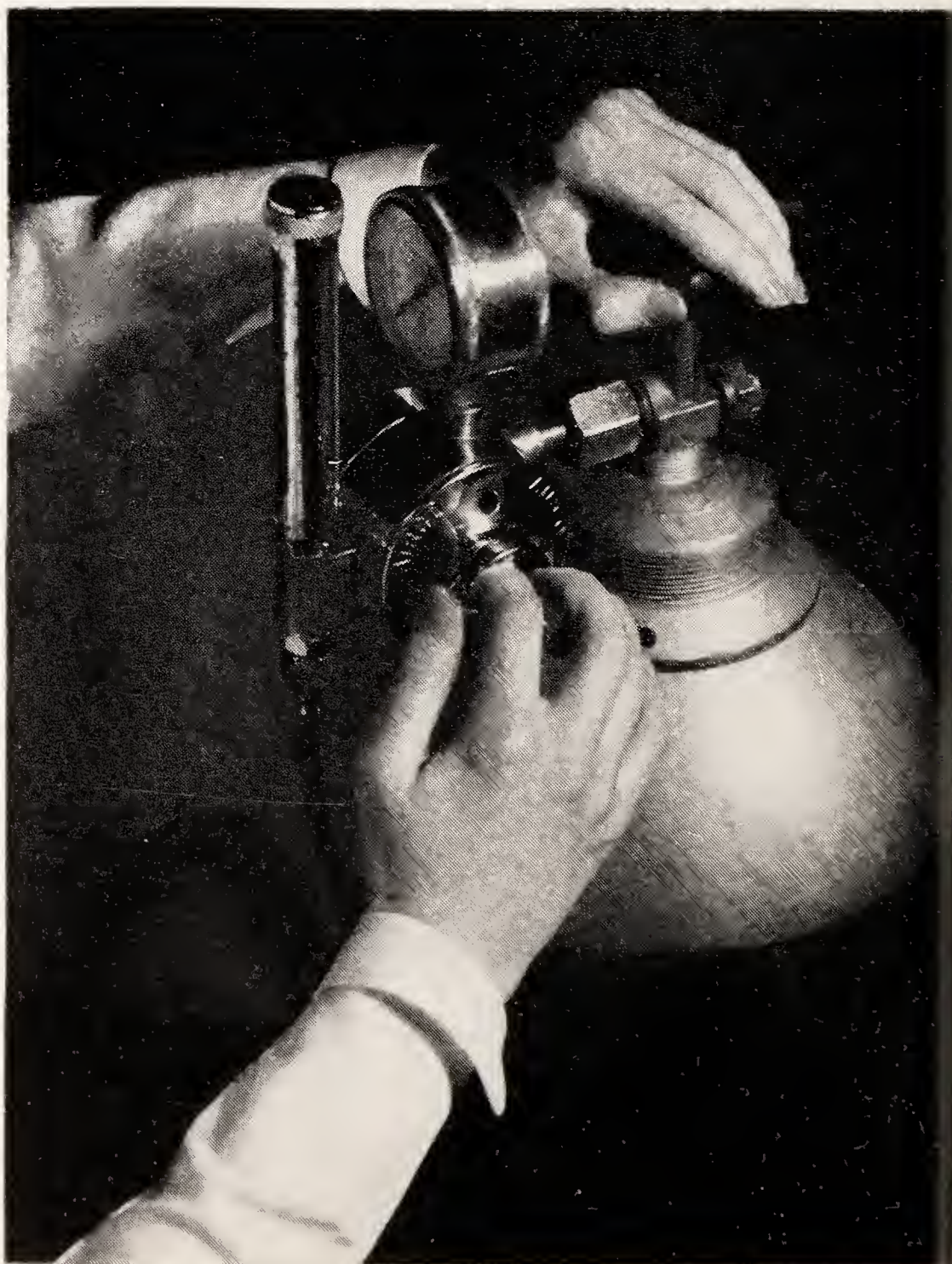


The nurse scrubs  
any one of many me-  
cal or surgical pro-  
dures.

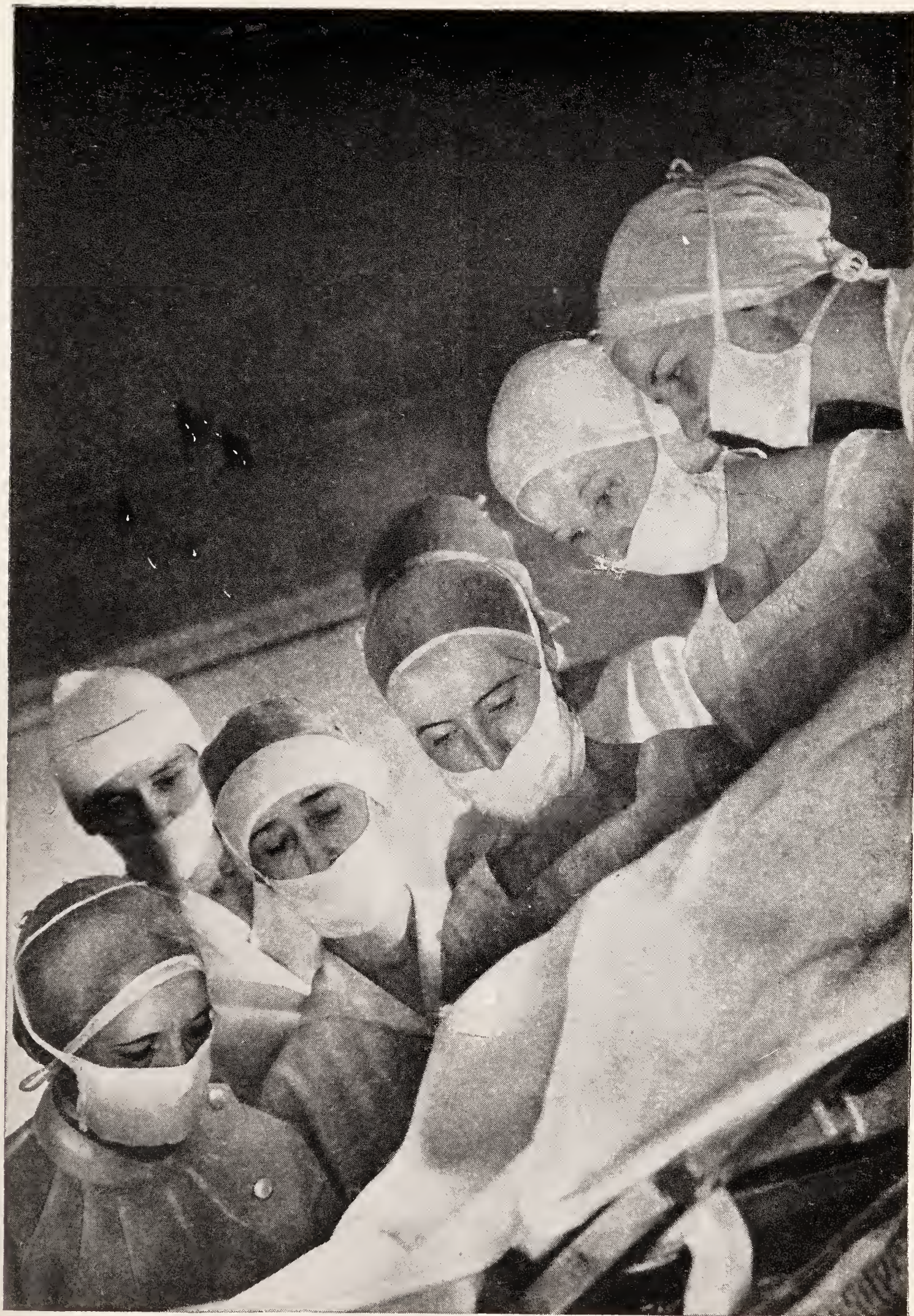
## NURSES' HANDS

Nurse adjusting  
the valve control-  
ling the patient's  
supply of oxygen.

*Photos by Marvin Breckenridge. Courtesy of Cornell University — New York Hospital School of Nursing, and of The American Journal of Nursing, Vol. 39, No. 5, May, 1939, pp. 506-507.*







## WOMEN IN WHITE

A photographic study by the Chicago surgeon, Max Thorek.





*U. S. Army Signal Corp*

## THE AMERICAN NURSE IN WORLD WAR II

Aid is administered to an injured soldier by an Army nurse.



## II

### The Nurse of Greece



Excitement prevailed throughout Attica at the time of the Panathenaea. All the inhabitants, even the prisoners, took part in this national festival. Every Attic colony sent its delegates and sacrificial animals to iris-crowned Athens in her amphitheater of hills. After the public herald prayed to the goddess Athena, the helmeted and shield-bearing protectress of the city, food was distributed to the people. There were contests for all tastes: some lingered to hear the rivalries of philosophers, others watched the cock-fights; from a chariot going at full speed a youth leaped to the ground and back; the cyclic choruses and pyrrhic dances attracted attention; many listened to the singing, and to the playing on flute and cithara. For the last day of the Panathenaea was reserved the solemnity of the peplos, the saffron-colored garment woven by the virgins of Athens for the Virgin Goddess. As the procession began, men and boys, matrons and maidens, followed the peplos to the temple. At night, in her new robe, Athena looked down from the Acropolis, and by starlight saw her worshipers in the plains below.

An important feature of the Panathenaea was the recitation by rhapsodists of the hexameters of Homer. In this manner, the Greeks first heard the earliest and greatest of epics, the *Iliad* and the *Odyssey*. These poems educated Greece, for, aside from their artistry, they are source-books of archaeology, history, geography, astronomy, botany, and medicine: it is interesting to note with what anatomical precision and surgical zeal, 147 wounds are described in the *Iliad*.

The songs of Homer deal with man's primal interests, women and warfare. The ancient Persians were undoubtedly right when they intimated to Herodotus that the Spartan maid was not kidnaped, but went willingly with her captor; nonetheless, the origin of the Trojan War was



the abduction of Helen. The confession of Agamemnon, "For verily I and Achilles fought about a girl with violent words"—the girl being the fair-cheeked Briseis—revealed the cause of Achilles' wrath, which is the central theme of the *Iliad*; while the action of the *Odyssey* revolves around the wooing of Penelope. Far removed from these war-provoking women, there occasionally passes across the background of the Homeric epics, the humble figure of a nurse.

In the sixth book of the *Iliad*, the Trojan Hector, arrayed for battle, inquires about his wife, the white-armed Andromache. He is informed that she has hastened to the wall to induce him to stop fighting, and with her has gone the nurse carrying the child. After explaining to his wife why he must keep on fighting, Hector attempts to caress his child:

So saying, glorious Hector stretched out his arms to his boy, but back into the bosom of his fair-girdled nurse shrank the child crying, affrighted at the aspect of his dear father, and seized with dread of the bronze and the crest of horse-hair, as he marked it waving dreadfully from the topmost helm. Aloud then laughed his dear father and queenly mother; and forthwith glorious Hector took the helm from his head and laid it all-gleaming upon the ground.

Early in the *Odyssey*, the nurse Eurycleia appears upon the scene; purchased in her youth by Laertes, she had nursed his son Odysseus and his grandson Telemachus. She is now old, but for a moment Homer draws back the curtain of time, skillfully blending present and past:

Then they went, each man to his house, to take their rest. But Telemachus, where his chamber was built in the beautiful court, high, in a place of wide outlook, thither went to his bed, pondering many things in mind; and with him, bearing blazing torches, went true-hearted Eurycleia, daughter of Ops, son of Peisenor. Her long ago Laertes had bought with his wealth, when she was in her first youth, and gave for her the price of twenty oxen; and he honored her even as he honored his faithful wife in his halls, but he never lay with her in love, for he shunned the wrath of his wife. She it was who bore for Telemachus the blazing torches; for she of all the handmaids loved him most, and had nursed him when he was a child. He opened the doors of the well-built chamber, sat down on the bed, and took off his soft tunic and laid it in the wise old woman's hands. And she folded and smoothed the tunic and hung it on a peg beside the corded bedstead, and then went forth from the chamber, drawing the door to by its silver handle, and driving the bolt home with the thong.

Herodotus likewise depicts a faithful nurse. She had charge of a little girl who was very rich, but so ill-looking that the nurse brought her to the



shrine of Helen, near the temple of Apollo. As a result, the ugly brat developed into the fairest woman of Sparta, and caused much trouble in high society. Herodotus does not inform his readers whether the nurse was recompensed for her stratagem. In the dramas of Euripides, such as *Hippolytus* and *Medea*, the nurses are also nameless, and well they may be, for they have no life apart from the children or the elders they serve. They are entirely devoted to their duties, but human forces are helpless in the overwhelming cataclysm of a Greek tragedy. Toward the end, the nurse in *Hippolytus* says to the doomed Phaedra: "I nursed thee, loved thee, sought for thy disease a healing balm, and found it not."

In Plato's *Laws*, the Athenian stranger asks Clinias of Crete a series of questions:

Shall we risk ridicule, and lay down a law that the pregnant women shall walk, and that the child, while still soft, shall be moulded like wax, and kept in swaddling clothes till it is two years old? And shall we also compel the nurses by legal penalties to keep carrying the children somehow, either to the fields or to the temples or to their relatives, all the time until they are able to stand upright; and after that, still to persevere in carrying them until they are three years old, as a precaution against the danger of distorting their legs by overpressure while they are still young? And that the nurses shall be as strong as possible? And shall we impose a written penalty for every failure to carry out these injunctions?

It was an old belief that at birth the cubs of the bear are formless masses, gradually licked into shape by the tongue of the mother bear. As the human mother could not follow this procedure, it was the nurse's duty to squeeze the baby's body into shape with swaddling bands. Even the new-born gods were subjected to it. In Hesiod, Cronos (Time) swallowed his children as soon as they were born, for he learned from earth and heaven he was destined to be overthrown by his son, but he was deceived into swallowing a stone instead of Zeus, for the stone was wrapped in swaddling clothes. We learn from Plutarch's *Lycurgus* that the swaddling bandage was scorned by Sparta:

The women used to bathe their new-born babes not with water, but with wine, thus making a sort of test of their constitutions. For it is said that epileptic and sickly infants are thrown into convulsions by the strong wine and lose their senses, while the healthy ones are rather tempered by it, like steel, and given a firm habit of body. Their nurses, too, exercised great care and skill; they reared infants without swaddling-bands, and thus left their limbs and figures free to develop; besides, they taught them to be contented and



happy, not dainty about their food, nor fearful of the dark, nor afraid to be left alone, nor given to contemptible peevishness and whimpering. This is the reason why foreigners sometimes bought Spartan nurses for their children. Amycla, for instance, the nurse of the Athenian Alcibiades, is said to have been a Spartan.

Sanctioned by the profession until the threshold of modernity, persisting among people still in their folklore period, the swaddling bandage was one atrocity against infancy which the Spartan child escaped.

Since a nurse appears in Homer, the father of poetry, and in Herodotus, the father of history, it is logical to assume that she appears in Hippocrates, the father of medicine. But history cannot be written by intuition; the records must be consulted, and nowhere in the *Corpus Hippocraticum*—the seventy books associated with the name of Hippocrates—is there any reference to a nurse. Hippocrates sat at the bedside, and his observations created clinical medicine. He did not label diseases, but he described them with such fidelity that in reading his original cases the modern physician can make the diagnosis. He was the first to observe cyclic respiration, the splashing sound within the chest when gas and pus accumulate in the lungs, the bulbous enlargement of the fingers seen in heart disease, and the characteristic signs of approaching death; he was the first to describe appendicitis, globus hystericus, tetanus following slight wounds, the cerebral palsies of childhood, and mumps complicated by swelling of the testicle.

Hippocrates paid much attention to the general comfort and hygiene of the patient; he taught his disciples the principles of bathing, dieting, bandaging. How could the Hippocratic physician find the time to perform all these nursing procedures? Could he prepare barley water and mix hydromel and oxymel? Could he arrange an enema for Crito, and sponge the wife of Dromeades until her fever abated? Malaria was endemic in Greece, tuberculosis was prevalent, and typhus came in an epidemic. The Hippocratic physicians were busy men; they could prescribe hot fomentations for the colic of Melidia, but other hands were needed to apply the poultice. Hippocrates directed attention to the condition of the patient's bed, but was the physician supposed to make the bed right? The Hippocratic method of treating disease, which definitely avoided drastic measures and relied on the healing power of nature, was a clear call for a nurse.



What did the Greek doctor do when he needed a nurse? A passage in Hippocrates (*Decorum*) is significant:

Let one of your pupils be left in charge, to carry out instructions without unpleasantness, and to administer the treatment. Choose out those who have been already admitted into the mysteries of the art, so as to add anything necessary, and to give treatment with safety. He is there also to prevent those things escaping notice that happen in the intervals between visits. Never put a layman in charge of anything, otherwise if a mischance occur the blame will fall on you.

It is thus seen that when a Greek practitioner left a patient who required watching, a medical student remained in the sickroom. It has since been learned that a doctor-in-embryo is not a trained nurse.

Between the poet Homer and the biographer Plutarch a thousand years intervene, and the literature of the period illustrates the position of the nurse in Greek life. A boy is born in Attica, and nurse gives him his first bath, afterward wrapping him in swaddling clothes. She suckles him, and he thrives at the breast of his foster mother. He is the first-born son, and on the tenth day will be named after his father's father, let us say, Apion; his brother will be named after his mother's father. In the growing-up period Apion is at times unruly, and nurse applies a sandal to the little Greek buttocks; as he remains defiant, she tells him—though the philosophers frown—about the frightening hobgoblins, Acco and Alphito, who carry off naughty children, and of Lamia and the Gorgon who devour them. Such moods are rare, and usually Apion wants nurse to play with him; she finds his hoops and peg tops and knucklebones; he rides his hobbyhorse and gocart until he has had enough. Now he puts his toys away, and wants tales of the heroes who have become so familiar to him; like any Greekling, he laughs aloud when he hears what the young Hermes did in his cradle. Nurse tells him too about the gods and goddesses, but she never narrates how Zeus overthrew his own father, as this might provoke filial disobedience; and she suppresses the rumors coming down from Olympus that Apollo is chasing nymphs again. There may be more play, or his relatives may come to visit Apion. The Grecian twilight covers the household, and the lamps are lit. The elders may keep on talking, but the child must sleep. Nurse takes him in her arms, and she knows many slumber songs. Little Apion's head begins to nod as nurse sings the lullaby from the idylls of Theocritus.



As the years pass, Apion develops into splendid manhood, and a young wife crosses his threshold. Nurse, growing old, remains with the family. She addresses Apion as dear son, and he calls her mother, as did the truehearted Eurycleia and her nursling, the lordly Ulysses of the *Odyssey*. Even in her concluding years, nurse finds much to do and is useful to the end. Finally Charon comes in his silent ferry, and nurse goes down the river of the nether world. She is not forgotten, and the family she served erects a stele: the devoted nurse is seated, her hand upraised in farewell to Apion and his wife. These gravestones have been found throughout Greece, and the names of the nurses Melitta and Malicha of Cytherea are still visible. Such was the Homeric nurse, and the nurse of the classic period. The Greek nurse was a wet nurse or a nursemaid, a faithful domestic who served her master. Poverty at times would drive a woman of the metic class to nursing, but usually the Greek nurse was a slave or captive. She bears no relationship to the development of sick-nursing, and is not the remote ancestress of the trained nurse. Yet who would relinquish the comfortable word "nurse," from *nutrix*, *nutrire*, to nourish?

It was a social calamity that woman in Greece lost the freedom and the esteem which had been her portion in the heroic age of Homer. When a cultivated Ionian retired to his *andronitis*—the men's part of the house as distinguished from the *gynaecoonitis* or women's apartments—he read with approval in Aristotle:

Again, as between the sexes, the male is by nature superior and the female inferior, the male ruler and the female subject. . . . And since, as we saw, the science of household management has three divisions, one the relation of master to slave, one the paternal relation, and the third the conjugal, it is a part of the household science to rule over wife and children (over both as over freemen, yet not with the same mode of government, but over the wife to exercise republican government and over the children monarchial); for the male is by nature better fitted to command than the female, except in some cases where their union has been formed contrary to nature.

The subordinate position which woman occupied in classic Greece explains why she was not instructed in medicine or nursing.

The absence of nurses from the healing cults is additional evidence that the ancient Greeks did not train their women to attend the sick. Zeus bestowed upon Hecate the rôle of the nursing-mother of children, the goddess-mother of the young, but only in the sense that every mother



is an instinctive nurse. We read in Hesiod's *Theogony*: "And the son of Cronos made her a nurse of the young who after that day saw with their eyes the light of all-seeing Dawn. So from the beginning she is a nurse of the young, and these are her honors." Hecate and her children lived on the island of Colchis, and tradition attributes to Hecate the earliest use of aconite, and to her daughter Medea the discovery of colchicum, which would make these women divine pharmacologists rather than nurses. Asklepios, god of medicine, had a daughter, Hygiea, who is depicted as the goddess of health, not as the goddess of nursing. In the temples to Asklepios throughout Greece, priestesses were present as basket-bearers (*Kaniphoroi*) and as carriers of mysteries (*Arrephorio*), but no surviving inscription contains the suggestion that they were employed as nurses. Neither the sacred nor the secular medicine of Greek knew the trained nurse.

The Greek rendered homage to Athena, goddess of wisdom, and he worshiped Aphrodite, goddess of love, but this was for the sake of art. Greece was a man's world. The adult Greek reserved even his passionate friendships for boys; *pederastia*, or boy-lover, was a familiar Greek word. The Greek had the glamorous hetaira for his entertainment, but he preferred his respectable women, dumb. It is true that in the hour of parturition, midwives, known as *omphalotomai* or navel-cutters, swarmed into the lying-in chamber; their knowledge was empirical, and they worked apart from the medical profession. There were neither female physicians nor nurses in Hellas, for it did not enter into the Greek scheme of life to initiate a body of young maidens into the mysteries of the healing art. The Greeks, the most intellectually gifted of all people, never realized that man and woman could work together for the preservation of health and the conquest of disease. Thus Greece laid the foundation of scientific medicine, and omitted the cornerstone of trained nursing. In that cultural cradle, from which the arts and sciences are derived, was born the Medicine which is one of the most remarkable manifestations of Greek genius, though it was Medicine without Nursing.



### III

## Nursing Under Monasticism



**JULIANUS APOSTATA.** In an unhappy hour, Flavius Claudius Julianus (A.D. 331-63) was summoned from the groves of Athena to the harsh court of Rome. His heart was full of foreboding as he left the scholars and artists he loved for the spying eunuchs of his imperial cousin. His contemporaries noted, and historians have recorded, with what reluctance the youth put aside the cloak of a Greek philosopher for the robe of a Caesar. The stars had ordained it thus, and Julian was without choice. He was a surviving member of the house of Constantine the Great, the first Christian emperor of Rome, the man of destiny who had seen in the noonday sky the vision of the Flaming Cross with the words, "By this sign, conquer!" Julian, too, must conquer by that sign. His cousin marched eastward to put his imperial foot on the neck of Persia, and the bewildered Julian found himself the ruler of Gaul. Forced to learn military tactics, he was heard to cry, "O Plato, Plato, what a task for a philosopher!" He proved to be a military genius, and while sighing for Homer, subdued the Franks and the Alamanni. A general so victorious could not remain in second place, and, clashing their shields against their knees, his fierce soldiers elevated him to the rank of Augustus.

Supreme whether he wished it or not, Julian was now able to remove his mask, and to reveal the terrible secret he had hidden for years. Constantine had made Christianity the legal religion of Rome, but Julian abhorred the doctrine that had come out of Galilee. The definitions of orthodoxy and heterodoxy changed with every fluctuation of political power. Crowds of dirty Oriental slaves, divided into a hundred fighting sects, were certain of their own salvation, and equally convinced of the damnation of their fellows. Bishops kicked and clubbed bishops to death; armed monks killed multitudes with obscene outrages and a murderous



hatred never known before. Nature was stripped of its divinity, and in its place appeared a vulgar paradise for the followers of Christ and an eternal abyss for others. Julian, a pagan stepping out of antiquity into the medieval darkness, turned with repugnance from the new creed. To him the gods of Homer were alive; he saw Athena behind the clouds, and the footsteps of Apollo lingered in the woodlands. As Julian thrust his own hands into the entrails of sacrificial animals, he heard the thunderbolts of Jove, and read the message that the immortal gods watched him from Olympus.

Julian, who had been trained to regard Christianity as an instrument of persecution, astonished his age by issuing an edict of universal toleration. Julian the Apostate would not destroy the Galileans, but they must no longer desecrate the temples of the gods. He would let this noisy rabble live, that they might learn the superiority of the Greek way of life. The Christians were displeased with the Julian edict, for they could no longer exterminate heretics; saints like Gregory Nazianzus and Eusebius Hieronymus, known as Jerome, complained that it deprived them of the crown of martyrdom. Julian was compelled to admit, however, that paganism had no movement comparable to Christian charity: "It is a disgrace that the Galileans should support the destitute, not only of their religion, but of ours." In his epistle to Arsacius, the emperor exhorted the pagan high priest of Galatia to establish xenodochia and hospices, supported by public revenues, to rival the philanthropic institutions of the Christians, where the ailing poor received shelter and care without distinction of race or creed. Christian monasticism, organized in Julian's century, gave spontaneous birth to that unique offspring, monastic medicine and nursing.

FOUNDERS OF MONASTICISM. The Egyptian-born Anthony (250-350), at the age of twenty, was already sick of the world. He placed his sister in a nunnery, with other veiled virgins, and forsook the world. The first Christian monk, he dwelt in the desert, and lost himself on a mountain. Anthony had no companion except the Evil One, tempting him with family joys, duties to his fellowmen, pride, hunger, and sex. Satan was defeated by the saint, who was then truly alone. The years passed, and Anthony realized he was no longer alone, for the surrounding caves were filled with men, waiting for his word. The eremite had become a



cenobite, and without any definite rules Anthony established his disciples as a community. He was followed by another Egyptian, Pachomius (292-346), who created the first religious order: Anthony was the father of Christian monasticism, and Pachomius the father of its organization. Basil (329-79) of Caesarea in Cappadocia was the main builder of systematic monasticism until the time of Benedict (480-543) of Nursia, near Spoleto in Umbria. Each of the four founders of monastic life, Saints Anthony, Pachomius, Basil, and Benedict, had a pious sister who became identified with communities of nuns. Monasticism is a spiritual anodyne for bruised souls: its real foundation is the desire of the human heart to escape the fever of life.

THE BASILIAS. It is not etiquette to ignore an emperor's repeated invitations to court, but Basil could not forgive the apostasy of Julian. Besides, with the aid of his widowed mother Emilia and his saintly sister Macrina, the influential Basil was occupied in developing the Basilian rule which is still the basis of the statutes in the monasteries of the Eastern churches, and in creating the hospital-city known as the Basiliast. The eloquence of Gregory of Nazianzus, surnamed Theologus, has frequently been quoted:

Before the gates of Caesarea, called by Basilus out of nothing, rose a new city devoted to works of charity and to nursing the sick. Well-built and furnished houses stood on both sides of streets symmetrically laid about the church, and contained rooms for the sick and the infirm of every variety, who were entrusted to the care of doctors and nurses.

Basil grasped the hand of lepers, gave them the kiss of brotherhood, and segregated them in a special division; he likewise had departments for the physically crippled and the mentally afflicted. Basil supervised the extensive medical and nursing personnel, the carriers of the sick (*parabolani*), the male and female laborers, the many artisans and skilled craftsmen.

What sort of medicine was practiced in the Basiliast, and in other institutions under the monastic ideal? Centuries before the time of St. Basil, the Hippocratic author of the treatise on epilepsy stated: "I am about to discuss the disease called sacred. It is not, in my opinion, any more divine or more sacred than other diseases, but has a natural cause, and its supposed divine origin is due to men's inexperience, and to their wonder at its peculiar character." Thus were the gods expelled



from medicine, thus was enthroned the doctrine of the uniformity of nature, thus did Greek medicine become a science. Basil swept Hippocratism away by his denial of the natural origin of all diseases, and by his assertion that God sends certain diseases as a test of faith or as punishment for forgotten sin, and sometimes even permits Satan to cause disease. Basil's references were I Corinthians 11:30; Micah 7:9; and Job 2:6, 7. He required no other proof.

Basil the Great, as he was called, put an end to the Hippocratic doctrines of the natural cause of disease, and of the healing power of nature. Since disease was theologic in origin, then treatment must also be theologic. Since disease is the manifestation of either divine or devilish anger, it follows that the art of the physician and the ointments of the apothecary are useless, and only the relics of the saints, or the appeasement of Satan, can be efficacious. Triumphant Christianity overthrew pagan Hippocratism by reintroducing supernaturalism into medicine, with the folkloristic belief in disease as a conflict between good spirits and bad spirits; by the suppression of free speech and free opinion; by forbidding investigation of the human body; and by spurning the body as a vile tenement of clay, impeding the immortal soul in its upward climb to salvation. As for monastic nursing, in theory at least, it was less concerned in restoring a sick body to health than in preparing the soul within that body to meet its Maker.

Basil himself was complacent about investigation, for all necessary knowledge was in the Bible. As Basil declared in his Homilies: "Upon the essence of the heavens we are contented with what Isaiah says. In the same way, as concerns the earth, let us resolve not to torment ourselves by trying to find out its essence. At all events, let us prefer the simplicity of faith to the demonstration of reason." But that is just what medicine cannot do. Medicine must continually torment itself to find the cause of disease, and to improve the treatment. When medicine accepts anything in the simplicity of faith instead of demanding the demonstration of reason, medicine dies. So Basil founded a famous hospital under the monastic system, and employed *medici* and *nosocomi*, but really staffed it with the ghosts of religion. Nothing is known of the training or methods of monastic nursing, or what it accomplished for the alleviation of pain or the recovery of health. Monastic nursing, throughout the



centuries, was mainly non-medical nursing, inspired by Christian charity and not by science. No doubt the nurses did something, and no doubt their presence was a comfort to the patients.

EUSEBIUS HIERONYMUS. A sackclothed hermit in the desert of Chalcis, presbyter of Antioch, churchman in Constantinople, an ascetic in the midst of luxurious Rome, and for many years head of the monastery he built in Bethlehem, Jerome (345-420) was the most forceful of the Fathers of the Catholic Church. A grim and caustic saint, he was canonized, neither for his character nor his sanctity, but for his scholarship. The Hercules of celibacy, Jerome was one of the most productive authors of all times: he gave us the official Latin version of the Bible (the Vulgate, or common edition), translating the Old Testament from the Hebrew and the New Testament from the Greek. Jerome was the earliest of the Latin fathers who knew Hebrew, or at least was the first who emphasized its significance. In Latin literature, only the letters of Cicero and Seneca can compare with those of Jerome, and it is curious to note that while the classic correspondence of the pagan authors can be read aloud without impropriety in the schoolroom or the family circle, the same cannot be said of the epistles of the Christian saint. Jerome, like other famous celibates, was obsessed with sex, and several of the passages in which he praises chastity or extols virginity are distinctly pornographic.

Jerome, a man of chronic wrath, a hater of the human race, broke up many families and exulted in the suffering he caused. Yet he could be very sweet, as in the charming letter (cxxviii) on feminine training he wrote in his old age to the infant Pacatula: "So my little Pacatula must read this letter herself in days to come; and in the meantime learn her alphabet, spelling, grammar, and syntax." The object of Jerome was to "cut down by the axe of Virginity the wood of Marriage" (*Ep.* cxxiii), and he declared the only possible excuse for marriage was the production of male and female virgins for heaven. Jerome confesses (*Ep.* xxii) that in the fires of lust which assailed him in his solitude he was surrounded by groups of dancing girls; in reality, he was surrounded by the wealthiest and noblest Roman matrons and virgins of three generations. The heavenly harem of Jerome devoted itself to interpretation of the Scriptures, and to good works which included nursing.



FABIOLA. Among the women who accepted Jerome as their spiritual guide was Fabiola (4th century), a descendant of the Fabian gens whose most illustrious member was familiar to every Roman schoolchild as "The man who by delaying saved the state." According to Jerome, it was the fate of Fabiola to marry a husband of such scandalous vices that not even a prostitute or a common slave would have lived with him. Fabiola finally divorced him, and remarried because, in Jeromian language, "she felt herself dragged like a chained captive into carnal intercourse." After the death of her second husband she realized her sin, stood publicly among the humblest suppliants for forgiveness, founded a hospital in Rome (A.D. 390), did further penance by visiting Jerome in the Holy Land, returned to Rome when the Huns invaded Palestine, and established a hostel for travelers at Ostia. Toward the end of the century (A.D. 399), Jerome wrote a lengthy letter on the death of Fabiola to her kinsman, Oceanus. This letter-essay (lxxvii) is of extraordinary interest as the first literary document in the history of nursing. The story of nursing cannot be told without quoting the passage in which Jerome introduces the nosocomium of Fabiola:

First of all she founded a hospital (*nosocomion*) and gathered into it sufferers from the streets, giving their poor bodies worn with sickness and hunger all a nurse's care. Need I describe here the diverse troubles from which human beings suffer, the maimed noses, the lost eyes, the scorched feet, the leprous arms, the swollen bellies, the shrunken thighs, the dropsical legs, and the diseased flesh alive with hungry worms? How often did she carry on her own shoulders poor filthy wretches tortured by epilepsy! How often did she wash away the purulent matter from wounds which others could not even endure to look upon! She gave food with her own hand, and even when a man was but a breathing corpse, she would moisten his lips with drops of water. I know that many wealthy and devout persons by reason of their weak stomachs carry on this work of mercy by the agency of others, and show mercy with the purse, not with the hand. I do not blame nor do I by any means construe their lack of fortitude as lack of faith. But while I excuse their weakness, I extol to the skies the ardent zeal that perfect courage possesses.

RADEGUNDA OF POITIERS. As Radegunda (6th cent.) was approaching puberty, Clotaire, the son of Clovis, took her to his farm at Soissons and made her one of his wives. Clotaire had seized the little girl in the forests of Thuringia, and he was soon to learn that he had caught a wild creature. As was natural in the son of Clovis, Clotaire was a man of



violence, who murdered many members of his own family; king of all Gaul, ruler of much of Germany, he forced an annual tribute of five hundred cows from the Saxons, yet never did he succeed in taming Radegunda. From the legendary rape of the daughters of the Sabines until historical times, women have fallen in love with their captors, but Radegunda could not see Clotaire, for she had given herself to the Celestial Bridegroom. She turned out to be one of those women who washed the feet, and with their hair, dried the sores of lepers. Entering her chamber at night, the king found the room empty, for his queen was absent on an errand of mercy; sitting down to dinner, the king had to wait, for the queen was busy with a patient; if a pious scholar came to court, the queen ignored the king entirely. Clotaire raged, and swore he had married a nun instead of a wife; which was the truth. Thinking to subdue her by one bold stroke, he slew her brother; then Radegunda left him, and despite all his bluster, never returned.

Radegunda, ordained a deaconess by Bishop Medardus, now wore a hair shirt, and, exchanging her queenly robe for a nun's dress of undyed wool, served the Lord. Outside of Poitiers she founded a monastery-hospice to which she gave a rule (A.D. 559), this being the first such institution established by a woman in France. Her deeds were known afar, and from Constantinople she received the sacred relics of the Apostles, and a fragment of the True Cross. In a nave of her church at Poitiers survives the ineffaceable footprint made by Christ when he visited Radegunda. The monastery harbored a more worldly guest, that lover of distinguished persons and good dinners, Venantius Fortunatus, the chief Latin poet of his time. Fortunatus summed it up by saying, "Radegunda wished me to stay, so I stayed." In return for the tempting meals, which at times were sufficiently luxurious to give the poet indigestion, he sent her violets and verses. Under her influence he became a priest, a hymn writer and ultimately the bishop of Poitiers.

Fortunatus was also the biographer of Radegunda, and his *Vita* is the chief source of our knowledge of the saint. It is from him we learn she "shrank from no disease, not even from leprosy." There is no indication that a physician was connected with this hospice, nor is there evidence that the apothecary's salve or the surgeon's knife was used. Radegunda's patients undoubtedly would have testified that she nursed them back to health, but it was not medical nursing. In the care of the



sick in her hospice, she personally bathed the patients. Special interest attaches to the baths which were built at the instigation of Radegunda herself: there was a Roman touch in this Frankish woman.

It is difficult to conceive of nursing without bathing, for the hygiene of the skin requires bathing. In this respect monastic nursing was retrograde: it outlawed the use of the bath. When Jerome's disciple, Paula, who presided over a convent in the Holy Land, noticed any novices addicted to bathing, she taught them: "The purity of the body and its garments means the impurity of the soul." Jerome himself stated in his vigorous way: "Does your skin roughen without baths? Who is once washed in the blood of Christ needs not wash again." The saintly biographer of St. Anthony relates with admiration that the patriarch of monachism was never guilty of washing his feet. Countless monks and nuns followed him in regarding the cleanliness of the body as the defilement of the soul. St. Euphrasia joined a convent whose 130 nuns never thus polluted their souls, for they never washed their flesh and they shuddered at the abomination of the bath. The stench of the unwashed Mary of Egypt and the filth of the worm-infested ulcers of the pillar-hermit, Simeon Stylites, caused these saints to be especially venerated by pilgrims and the faithful. Christian monasticism definitely destroyed the cult of the Roman bath. In the age of asceticism, when stimulation of the skin was condemned as provocative of sexual desire, the baths of Radegunda carried on the forgotten tradition of the Baths of Caracalla.

MATILDA. The mother of Matilda (1080-1118) was a saint (St. Margaret), and her father was king of Scotland; her husband was king of England, and although she had left a nunnery for the nuptials, she was married and crowned by Anselm himself in Westminster Abbey. Matilda, known also as Maud, Mahalde, and Mold ("Mold the good queen"), thus had reason for pride, but like her mother she wore a hair shirt, and in Lent humbly walked barefoot in the vicinity of churches. Most of Matilda's subjects hurried in the opposite direction when they heard the clattering sticks or the clanging bell of a leper, but Matilda welcomed the shunned lepers into her own home. Once she invited her brother David into her chamber, whose only other guests were lepers. Matilda, who had taken off her robe, washed and dried their feet and kissed them.

The aesthetic sense of David, or perhaps the suggestion of Satan, caused



him to protest to his beautiful sister: "Certes if the king were to know this, never would he deign to kiss with his lips that mouth of thine polluted with the soil of leprous feet." Matilda answered that in kissing the feet of lepers she was kissing the feet of Christ: she preferred the feet of the Eternal King to the lips of a mortal king. She invited her brother to follow her example, but David, the future saint, did not yet know the Lord, and he confesses: "I laughed—*mea culpa*—and returned to my comrades." David related the incident to another saint, Ailred of Rievaulx, who wrote it down for posterity. When David acquired the earldom of Huntingdon, he established a leper-hospital there: Ailred saw him in Abraham's bosom with Lazarus.

At Queensferry, on both sides of the Firth of Forth, the mother of Matilda had built guesthouses for the pilgrims of St. Andrews; Matilda carried on the good work by building in London, in St. Giles-in-the-Fields, a hospital for lepers (1101). Aside from the leper-house which Lanfranc, the Italian-born archbishop of Canterbury, erected for the leprosi in the forest of Herbaldown, Matilda's hospital was England's first institution for the care of lepers. It provided for forty lepers, a chaplain, a clerk, and a messenger; as the contributions of citizens and official endowments increased, the clerical staff was augmented, and matrons are mentioned; the chronicles are silent on the medical and nursing service. One hundred and fifty years after its foundation, the monk-chronicler, Matthew Paris, saw Matilda's hospital, and was sufficiently interested to make a sketch of it on the margin of his manuscript.

ABELARD AND HELOISE. Pierre Abelard (1079-1142) was the cleverest man of the twelfth century, and the most conceited; not content with his crushing defeats of the leading dialecticians of his time, he determined to experience both the dignity of the bishopric and the delights of love. Heloise (1101-64), noble, beautiful, learned, and still in her teens, was the object of his desire, and Abelard himself informs us that he deliberately planned her seduction. On the ground that he found the care of a household an impediment to philosophy, Abelard suggested to Heloise's uncle-guardian, Canon Fulbert of Notre-Dame, that he be received as an inmate of their home, for which he would pay generously, and in addition would take charge of the girl's education. Fulbert not only accepted the proposition, but instructed the teacher, if the pupil



should be disobedient, to use physical chastisement. The problem was even simpler than expounding *Sic et non* to entranced students, and Abelard exclaims: "Hereupon I wondered at the man's excessive simplicity, with no less amazement than if I had beheld him intrust a lamb to the care of a famishing wolf."

All the world knows what happened, for centuries of lovers have read the words of the wolf: "The books were open before us, but we talked more of love than philosophy, and kisses were more frequent than phrases." Abelard accomplished his purpose, but the vanity of the man did not permit him to enjoy the victory of love in secret; he celebrated his conquest in amatory verses which were sung as ballads in the streets of Paris. Heloise gave birth to a son in Brittany, and the parents were clandestinely joined in wedlock, for the lover who had wished his exploits to be noised abroad, had become the husband who insisted his marriage be kept hidden. Abelard, who had once wondered at Fulbert's stupidity, was destined, for the remainder of his calamitous life, to remember his vengeance; accompanied by a group of friends, Fulbert burst by night upon the sleeping Abelard, and when the canon left the philosopher's chamber, Abelard was no longer a man.

The castrated scholar buried himself in a monastery, and commanded Heloise, not yet twenty, to take the veil. The restless mind of Abelard gave him no peace, and being urged to reopen his school, he found that neither his eloquence nor his disciples had abandoned him. The forerunner of Aristotelian rationalism introduced doubt into dogma, and placed knowledge before faith. Denounced for heterodoxy, he was compelled to cast his book into the flames. Abelard was finally broken by the emaciated saint, Bernard of Clairvaux, who rode through Europe on a mule, extirpating the very shadow of heresy. Bernard brought against Abelard the terrible charge: "He has gone beyond the limits set by our forefathers." The theologians realized the necessity of prohibiting such departure from the accepted doctrines. Censured at Soissons, condemned at Sens, the truthseeker was now convicted at Rome.

In his concluding days at the abbey of Cluny, and ultimately in the priory of Marcel, the memory of his last triumph may have brought some consolation to the fallen scholar. Tired of his warfare in monasteries, quarreling with his fellow-monks whom he despised, Abelard wandered off into the wilderness as a hermit. His retreat was discovered, and the



thousands of students who had sat at his feet on the foundation-stones of the rising University of Paris, were followed by other crowds of students who made a path to his shelter of stubble and reeds, surrounding it with their own huts and tents. A feeling of gratitude must have come to the scarred heart of Abelard, for, although he soon left this region, he established there a convent known as the Paraclete (the Comforter), of which Heloise was the first abbess. In these isolated cloisters Heloise wrote to Abelard the three *Letters* which are deathless classics in the literature of love. No emperor or potentate, no warrior or conqueror, no poet or artist, has ever received such letters. The life of Abelard was indeed bitter, but if he had been a true philosopher he would have known that not of many men could posterity say: "He lived in anguish and died in humiliation, but he had glory and he was loved."

There was no hospital at the nunnery of the Paraclete, as visitors were not desired, sick or well, male or female. An infirmary was unavoidable in that solitude, and in formulating the rules for its management, Abelard is careful to exclude men as much as possible ("some sister should be skilled in venesection, that it may not be requisite for a man to come in for this purpose"); monks may enter for the Sacrament, but they should be decrepit, and the nuns must be protected from their gaze by a screen. Incidentally, these rules show that although Abelard was branded as a heretic by his age, he appears sufficiently pious by later standards. The rules are devoid of scientific value, but they furnish a sample of medicine and nursing under monasticism:

Let the infirmaria look after the sick, preserving them at once from sin and from want. Whatever their infirmity requires, whether in food, baths, or anything else, is to be given them. Meat is never to be withheld, except on Fridays and special vigils and fasts. The more they think upon their death the better they will be kept from sin, and especially should they study silence, and be instant in prayer. There must always be some one on duty to give aid when requisite, and the place must be provided with all things needed in sickness. Drugs also must be got if necessary, according to the opportunities of the locality, and this will be done the more easily if the presiding sister is not without medical knowledge. It is she also who must look after those who are bled, and some sister should be skilled in venesection, that it may not be requisite for a man to come in for this purpose. Opportunity for religious exercises must be provided. The recommendation of St. James, the apostle, as to anointing the sick must be carefully observed, especially in desperate cases. Let two elderly monks, with a deacon to carry the holy oil, come in and celebrate this sacrament, the sisters being present, but with a



screen interposed. And the infirmary shall be so built that the monks may have access and regress without seeing the sisters or being seen by them. The deaconess and cellaress shall visit the sick at least once daily, and carefully provide for their needs spiritual and bodily. When a sick person comes into the agony, she who attends her shall instantly run into the convent and beat a board, and the whole convent at whatever hour of the day or night shall hasten to the dying, unless prevented by religious exercises. In this case, since nothing must be put before the service of God, let the deaconess, with those whom she shall choose, go, and let the rest follow as soon as possible. And as they go, let them at once begin the litany as far as the invocation of saints, and then sing psalms or hymns suitable to the occasion.

HILDEGARDE OF BINGEN. Prophetess, Sybil of the Rhine, and Saint, are among the appellations bestowed upon the German nun, Hildegarde of Bingen (1098-1179). At the age of seven she was placed in the monastery of Disibodenberg on the river Nahe, and the remainder of her long life, except when she was absent on religious journeys, was passed within monastic walls. The isolated monastery at Disibodenberg was a double institution under the authority of an abbot, with a lady-superior in charge of the convent. It was not necessary for Hildegarde to study, for God was her private schoolmaster, and she knew everything by inner illumination under divine guidance. According to a passage in her biography (*Vita* chap. xiv), during her years in Disibodenberg she devoted herself to nursing in the conventual infirmary. This was in conformity with the Rule of St. Benedict: "Before all things and above all things care must be taken of the sick."

Hildegarde succeeded Jutta, sister of the count of Sponheim, as abbess of Disibodenberg. Hildegarde was now a woman of mature years, and as she would no longer share authority with anyone, she decided to take a group of nuns with her and establish a new monastery on the Ruppertsburg near Bingen on the Rhine. The abbot protested, expressing his skepticism of the vision which directed Hildegarde to found her own community; but eventually Hildegarde had her way, as she always did. She reigned supreme at Bingen, and in addition to adopting the regulæ of St. Benedict, added rigors of her own. Hildegarde was frequently ill and could not rise from bed, but her strength lay in her visions in which she heard a heavenly voice speaking directly to her. Such was her celebrity that she did not hesitate to admonish popes and advise emperors. One pope, after acknowledging her supernatural gifts, ventured to add a word of caution: "We congratulate ourselves in this grace of God, and we con-



gratulate thee, but we would have thee reminded that God resisteth the proud, but giveth grace to the lowly." Hildegarde bowed her head in humility, and informed the pope that she was only a lowly woman; but he must heed what she tells him, since in her humbleness the voice of God speaks through her.

An early *materia medica*, known as the *Physica*, and other medical writings are attributed to Hildegarde. The *Physica* perpetuates folkloristic medicine: "Carrying about a dead frog is good for the gout, drinking water out of a cypress bowl rids one of devils and fantasies, eating raven's flesh should be avoided since it encourages thieving propensities." The unicorn was not a fabulous creature to Hildegarde, but an important element in *materia medica*:

As the serpent in the Garden of Eden avoided the man and gazed at the woman, so this animal flees from men and follows females. A certain philosopher, skilled in the ways of beasts, had long hunted a unicorn, but could not catch him, whereat he marvelled greatly. But one day he went hunting with a company of men and women, and the unicorn, seeing the girls, slackened his pace, sat on his hind legs, and stared at them. And the philosopher, when he had diligently considered this, saw that the animal might thus be caught, so he came up behind him and captured him. For the unicorn, when he sees a girl, marvels that she has no beard, and yet has the form of man, and if there are several girls he marvels the more and is caught the more easily. Get a unicorn's liver and make it into an ointment with yolk of egg. There is no leprosy of any kind which this will not cure, if the patient uses it often, unless his death is foreordained, or God willeth not that he be healed. Make a belt of unicorn's skin, and wear it next your own, and no pestilence or fever will harm you.

Hildegarde's emphasis on the glittering light accompanying her visions, has caused her symptoms to be recognized as the scintillating scotoma of migraine; but the extraordinary career of this Benedictine nun, dominated from childhood to old age by celestial-satanic phantasmata which revealed heaven, hell, and the future, is evidence, not alone of her own functional nervous disorder, but of the neurosis of the twelfth century. As her fame increased, she was consulted by the most influential personages of the time, who appealed for her advice and begged for her predictions. A humbler stream likewise made its way to the door of her convent: sick and infirm pilgrims came for her healing touch, and we are told that all who applied to her regained their health. She no longer concerned herself with nursing, for miracles act instantaneously, and Hildegarde's patients recovered without convalescence.



**HEDWIG OF SILESIA.** Andechs-Meran was one of the chief royal families of the twelfth century; in the following century the family abolished itself in the blood of the Crusades, in the bachelorhood of the bishopric, and in the chastity of the cloister. This is the family which produced that remarkable galaxy of saints: Hedwig of Silesia; the saintly sisters, Anna and Agnes of Bohemia; and Elisabeth of Hungary and Thuringia. Withdrawn from a convent before her thirteenth birthday, Hedwig of Silesia (1174-1243) was married to Heinrich the Bearded, under whom Polish Silesia passed from Slavonic to Germanic influence. While performing the duties of the marriage-bed, Hedwig sighed for chastity, and after becoming the mother of six children induced her husband to live in continence. She likewise persuaded him to join her in charity, which he did by giving land to the Cistercians for a monastery (Heinrichsau), by founding a general hospital in Breslau, and a leper-hospital at Neumarkt.

The biography of Hedwig points out her devotion to the leprous women of Neumarkt:

She sent them money, food and game several times a week, and gave them liberally clothes and other necessities of life, taking care of them as though they had been her own daughters. With wonderful kindness she nursed those who were afflicted with bodily ills, and her affections melted towards the poor and infirm, whom she tended with great love and helpfulness.

The iconography of Hedwig reveals her as pleading the cause of the poor with her husband, giving them food and a house, distributing gifts to pilgrims, comforting a prisoner, visiting convicts doomed to death, attending the sick, and washing and kissing the feet of lepers.

**ANNA OF BOHEMIA.** Hedwig required all her saintly fortitude to withstand her family troubles; one sister became the bride of the king of France, but the pope invalidated the marriage, and she perished in misery; another sister (the mother of St. Elisabeth) was assassinated in the uprising of the Hungarians against German aggression; a prospective son-in-law murdered the king of Swabia, and her brothers were involved in the plot. There are numerous other instances in which the same family produced saint and sinner. Hedwig's earthly consolation was the marriage of her son, Duke Heinrich, to the Bohemian princess Anna, but she outlived this good fortune: led by the grandson of Jenghiz Khan, sweeping out



of the East like a black plague, the golden horde of Tartars overran Europe. They were halted at Wahlstatt by Heinrich, but he lost his life in the battle, and his head was hoisted high on a stake. Where he fell, his mother of many sorrows erected a chapel around which developed a monastery.

During her husband's lifetime, with his aid, and throughout the lengthening years of widowhood, Anna welcomed Dominican and Franciscan friars, and all who worked in the vineyards of the Lord. In dedicating herself to God, as a sign of her humility, she offered her body to the blows of the lash. She brought food to the poor and comfort to the leper, and of her it was written that she was to "forlorn children and orphans a protector and a mother." Anna nursed lepers in Prague, wearing the dress of the order of the Sisters of St. Lazarus, whose emblem was the Cross with a red star. Among her benefactions, she established in Breslau a nunnery in the name of St. Francis, and at Kreuzberg founded a hospital (1253) in memory of her cousin, St. Elisabeth.

AGNES OF BOHEMIA. Anna's sister, Agnes of Bohemia, was betrothed by her royal father to the Hohenstaufen of all the Hohenstaufens, Friedrich II, German monarch, Roman emperor, and king of Sicily and of Jerusalem. Agnes was indifferent to these titles of earthly glory. Friedrich's court, in whose culture the first Italian sonnet was born, and where science and philosophy and medicine and mathematics had their early renaissance, meant no more to her than did the emperor's wives and his harem and his bastards and his giraffes which astonished Europe. His contemporaries, anticipating posterity, called him the "Wonder of the World," but to Agnes he was merely an impediment in her road to heaven. It is true that the emperor was reddish, baldish and shortsighted, but had he been as radiant as the youthful Alexander, she would have been equally unmoved, for she was the spouse of Christ. Before the wedding bells rang, the death of her father made the marriage unnecessary: the emperor was disregarded, and Agnes remained a virgin.

Agnes came down from the castle on Hradčany Hill and built a hospital in Prague. She helped the distressed and nursed the sick; the hands that could have wielded the scepter, preferred to wash and mend the clothes of leprous beggars. A letter found at Prague thus describes Agnes:



There you might see her, the daughter of Premilaus III, king of Bohemia, lighting with her own hands the fire for the sisters; the sister of Wenceslaus IV, king of Bohemia, cleaning out the dirty rooms; the intended spouse of the emperor Friedrich II perspiring in the kitchen like any lowly maid. And while she did so, not by angry expression or stern face did she resent it; filled with joy she worked as a servant of Christ and proved it to those who saw her by the sweet expression she wore. She behaved in this way not only to those who were healthy, but she gladly extended her kindness to those who were ill; she spread soft beds for them, she carefully removed all that could distress eyes and nose, she prepared food with her own hands, and cooked it that it might be served to taste, with untiring energy, that the sick might be freed from ills, pains diminish, illness yield and health return. Such were her occupations inside the convent, but she was not confined by walls. Throughout Prague her doings were apparent.

FRANCIS AND CLARA. Daughter of a knightly family of the Sciffi, Clara of Assisi (1194-1253) heard much mocking talk in her home of the follies of one of her townsmen, Francesco Bernardone (1182-1226). Scion of a cloth-merchant, he wasted no time on education, and with difficulty signed his name in awkward letters; he squandered his father's money with the gay cavaliers of Assisi, feasting and drinking and singing through the night; arrayed in fantastic attire, leading his companions in their youthful buffooneries, he was crowned with garlands as king of the revelers. Such behavior was normal enough in the son of the wealthy Pietro Bernardone, and could be easily understood and readily forgiven. But a change had taken place which forced the heartbroken father to disinherit his son, while the son disowned his father and renounced his mother.

In the ruined chapel of Santa Maria degli Angeli, known as the Portiuncula, he heard the Call (Matt. 10:7-10): "Everywhere on your road preach and say, The kingdom of God is at hand. Cure the sick, raise the dead, cleanse the lepers, drive out devils. Freely have you received, freely give. Carry neither gold nor silver nor money in your girdles, nor bag, nor two coats, nor sandals, nor staff, for the workman is worthy of his hire." Francis gave up the world to follow that Call. Dressed in rags, he disgraced his family by bringing stones to rebuild chapels, and begging oil for their lamps. Pale and gaunt, possessing nothing, consorting with lepers as their friend and nursing apostle, he became the jest of the town; the children, taking their cue from the elders, flung mud at him, shouting, *Pazzo! Pazzo!* In those days, to all who saw that cadaverous face with the burning eyes, Francis of Assisi was indeed a madman.



One by one, disciples gathered around Francis of Assisi, giving up all their possessions and wedding Lady Poverty; when there were twelve, Francis led these first Franciscans to Rome to obtain official sanction. The imperious and powerful Innocent III, the most influential statesman of the age, was embarrassed by the presence of this mendicant who slept in the hedgerows and mixed with outcasts and brought into the papal palace the atmosphere of apostolic times. With tactful kindness the pope pointed out the difficulty of living as a primitive Christian in the complicated and wonderful thirteenth century, but in the end he had to yield to the humble imitator of Christ. When Francis returned to his native town, he was no longer a madman, but a leader whose Rule was approved by Rome. The excited people clamored to hear him, and as the Church of St. George could not accommodate the crowds, it was necessary for the bewildered clergy to open the Cathedral of Assisi to the barefooted friar. Francis was now twenty-eight, and among those who listened to his sermon was Clara, aged sixteen. Before the "poor little man of God," as Francis called himself, finished speaking, the young girl had become his disciple.

Clara went to Francis, and kneeling before him, besought his blessing as she told him of her resolve to live as he lived. Francis asked her to dress in penitential sackcloth and to go through the streets of Assisi, begging alms for the poor. Clara was eighteen, when, following the instructions of Francis, she secretly left the paternal castle on the night between Palm Sunday and Holy Monday, dressed like a bride. She arrived, with two companions, at the Portiuncula, and heard the friars singing matins. She knelt at the foot of the altar, as Francis received her vows of poverty, chastity, and obedience; by candlelight he cut off her long hair; and on the body of the highborn maiden he placed the begging tunic of a Franciscan. Not only did the wrath of her father, Favorino, fail to bring her home, but the week after Easter her younger sister, Agnes, joined her. The devotion of Clara to the Franciscan ideal soon made itself felt. She applied to the court of Rome for a grant of the privilege of poverty, which astonished Innocent III, as most of the papal mail consisted of requests for additional revenue. Francis installed Clara in the convent of San Damiano, whose abbess she remained for forty years.

Clara established the Franciscan nuns (1212), known as Poor Clares or Poor Clarisses. It was inevitable that their duties should include nursing



the sick, since Francis insisted that all his disciples take care of the afflicted. Although the leper was the most abhorred of all creatures, no delicate nobleman or sensitive scholar who joined the Franciscans could avoid service in the leper-hospitals. Francis himself slept in the lazarett-houses, washed and medicated the sores of the lepers, and on a memorable occasion dipped his fingers into the same dish from which a particularly repulsive leper was eating. Francis sent the diseased and the deformed to Clara and her nuns, who nursed them in the little huts of mud and branches, grouped around the convent.

The most interesting patient who ever came to San Damiano was Francis himself. Although only in his early forties, he had already received on his body the Stigmata of the Crucified, and, worn out with the austerities of his life, he wept much from half-blinded eyes. Clara nursed him as he lay in a cell of reeds in her monastery garden, or reclined under the olive trees. One day at mealtime, Francis and Clara sat at the table, but Francis did not notice the food. He seemed removed from this world, and upon awakening, his face was transfigured with joy. Francis had just composed the Canticle of the Sun. In this simple hymn, known and loved in all languages throughout the centuries, Francis praises God for Brother Sun and Sister Moon; for Brother Wind and Sister Water; he likewise praises the Lord for our Sister, the death of the body, from whom no living man can escape.

When Francis, with the Canticle of the Sun in his heart, left Clara at San Damiano, he promised he would return. The drugs of the day could not cure Francis, and the doctors decided cauterization was necessary. At sight of the brazier and the white-hot iron which was to be drawn across his forehead, Francis instinctively shuddered, but recovering, as he made the sign of the Cross, he addressed the fire in his inimitable way: "Brother Fire, you are beautiful above all creatures; be favorable to me in this hour; you know how much I have always loved you; be then courteous today." The cautery did not help, and Francis knew he was going to die. He realized he had abused his body, and he asked forgiveness of "Brother Ass, my body." He stretched out his arms and called, "Welcome, Sister Death." His last hours were made joyous by the news that five of his friars had been martyred in Morocco. They were with God, whom he would soon see face to face. He asked to be stripped of his clothing, and he lay on the ground to die in the arms of his Lady



Poverty. When his companions put him in bed again, he told them to sing the Canticle of the Sun, and the voice of the dying Francis mingled with the voices of his brothers. Clara survived Francis for over a quarter-century, constantly battling the papacy to maintain, in their purity, the unadulterated doctrines of Francis. Both Francis and Clara were canonized, and the bodies of both the saints repose in their native Assisi.

ELISABETH OF HUNGARY. The Landgrave Hermann lived in the Wartburg, the famed castle on a hilltop in the Thuringian Forest at Eisenach in Germany. It was a merry court, and the minnesingers Walther von der Vogelweide and Wolfram von Eschenbach spoke of the noisy crowds who came to the Wartburg by day and the throngs who pushed open its gates by night. Here was held the contest of the minstrels (1207), a battle whose melodies still echo beyond the Wartburg. In that very year a child was born in Pressburg, daughter of the Hungarian king, Andreas II, and his wife, Gertrud of Andechs-Meran. At the age of four, Elisabeth (1207-31) was transferred from her home in Hungary to the Wartburg; betrothed to Ludwig, the young son of the landgrave of Thuringia, she was to be brought up and educated under the supervision of his parents. The family soon repented of their choice, for Elisabeth, a strange child who walked like an apparition through the castle, did not respond to the culture and laughter and song of the Wartburg. Later, as troubled conditions lessened the importance of the Hungarian court, Ludwig's mother, Sophie, suggested that Elisabeth be sent home or placed in a nunnery.

Ludwig had succeeded his father as landgrave of Thuringia, and he would not let the Hungarian maiden go, for she was beautiful in her puberty. Ludwig was twenty and Elisabeth was fourteen when they were married. The ascetic Elisabeth had never expected worldly joy, but husband and children brought her human happiness. Moreover, her position as landgravine increased her opportunities for charity. Daily she went down from the Wartburg to the village below, distributing alms to the poor of Eisenach, feeding the hungry, nursing the sick, bathing the newborn and comforting their mothers with special tenderness. Elisabeth placed her compassionate hands on the bodies of lepers, for of all God's suffering children they were the most deeply afflicted. The chronicles tell us that a saint in Italy heard of the good deeds of the saint from Hungary,



and Elisabeth received, as a sacred token, the old cloak of Francis of Assisi: whether it actually happened, or is a pious invention, is unknown.

Other beautiful tales are told of Elisabeth, which one accepts as fact or folklore, according to one's convictions. On a day in midwinter, Ludwig returned from hunting and met Elisabeth going down from the Wartburg, hiding beneath her bulging cloak a large basket of food for the villagers. Irritated at the constant complaints of his family over Elisabeth's unbounded almsgiving, he harshly commanded her to let him see what she was carrying away. Elisabeth opened her cloak, and in the frosty air Ludwig saw an armful of blooming white roses and red roses. In reverence, he plucked one of these roses and preserved it for the rest of his life. Once when the family was staying at Neuburg, Elisabeth placed the leper boy Helias in her husband's bed. Mother-in-law Sophie was enraged, and felt that, finally, Elisabeth had gone too far even for Ludwig's forgiveness. Hastily bringing her son into the room, she pulled aside the covers to expose the leper child, and there lay Christ.

Elisabeth became a builder of hospitals. She established hospitals on the road to the castle; below the Wartburg in Eisenach at the edge of the Thuringian Forest; in Reinhardsbrunn; in Gotha (Hospital of Mary Magdalen, 1223); and finally in Marburg. Ludwig, who founded a xenodochium at Mencken, and helped the brothers of the nursing order of St. Lazarus to settle around Gotha, assisted Elisabeth in these undertakings. In the famine (1226) that occurred during a temporary absence of Ludwig from the castle, Elisabeth emptied the granaries of the Wartburg and arranged for the baking and distribution of immense quantities of bread for the surrounding population. Theodoric of Thuringia thus summed up her work: "She busied herself with works of charity and mercy, and those whom poverty, sickness or infirmity had oppressed more than others and were thereby more deserving of care, she placed in her hospital and most humbly ministered to their wants with her own hands." In many nations Catholic and Protestant hospitals are still called "St. Elisabeth's" hospital in memory of the thirteenth-century Hungarian woman who was hospital builder, nurse, and social worker.

One day, Elisabeth, playfully toying with Ludwig's pockets, found a cross he had hidden from her. She was overwhelmed with grief, for she now knew he was about to depart on the dangerous journey from which



many never returned. For centuries (11th to 14th) the Crusades drained the blood of Europe. The propaganda for the Crusades was the recovery of the Holy Sepulcher from the infidel; the real motive of many crusaders was plunder. The result was the utter defeat of the forces of Christendom. Of course Ludwig would have preferred to remain with his beloved family rather than fight the distant Saracens, but the summons of his emperor and the public opinion of the time gave him no choice. Since every peasant in Europe was fed the rumor that the sultan ate Christian children for breakfast, it became the duty of every Christian gentleman to liberate the Holy Land. Ludwig did not succeed in doing so; he did not even reach the Orient; like many others he died of fever in Italy. The death of Ludwig was the end of happiness for Elisabeth, and the beginning of her sainthood.

Elisabeth was now alone, except that by her side ever stood Konrad von Marburg, the immovable rock to which she clung to the end of her days on earth. Of impeccable orthodoxy, implacable and incorruptible, he scorned the high offices and lucrative positions offered him, and earned his daily bread by begging. He recognized the sweetness of Elisabeth's character, he revered her Christian virtues, and he recognized that God had placed a sanctified woman in his hands. Konrad's burning eloquence aroused the rabble to frenzy, his eyes flashed fire as he preached against heresy, and his wrestling with Satan caused so zealous a pope as Gregory IX to pronounce him the "Watchdog of the Lord": this holy man, who neither asked nor accepted anything for himself, felt it his duty to devote himself to Elisabeth and prepare her for sainthood. Konrad and Elisabeth were inseparable, and when the breath of scandal finally reached the woman, she answered: "In the sacrifice of station, wealth, and beauty, I have made myself a beggar, intending to preserve nothing except the adornment of womanly modesty, but if God chooses to take this also, I hold it to be a special grace."

The task to which Konrad had set himself was not easy, and few men, even in that age, would have been capable of its fulfillment. To prepare Elisabeth for sainthood, for she was worthy of it, he must scourge her body and break her spirit; he must bewilder her with contradictory orders which left her in helpless confusion; he must contradict every word she spoke, and deny every wish; with a never-relaxing hand he multiplied her afflictions, and deprived her of every human comfort to



make her ready for God. Finding that she was terrified by the threat to leave her, he used this device more than once. He whispered in her ear and roared at her; he abased her until she had no will of her own. When she fell at his feet imploring pardon, she was stripped to her shift and whipped until her body was covered with blood. She trembled at his approach, and wept at his departure. Elisabeth was Konrad's slave; and she adored the master who showed her the nearest way to heaven.

It was to be expected that Konrad would break the heart of Elisabeth by taking her children from her, but an even bolder stroke was to drive away her faithful waiting-women, who had served her since childhood and would readily have given their lives for her. Konrad thus knew the time had arrived for the final act. On Good Friday, Elisabeth entered a Franciscan chapel; friars and nuns were there; and the man from Marburg waited, not a shadow of doubt in his eyes. On the bare altar Elisabeth placed her thin hands. She renounced her own will, she denied her parents, she confessed her regret she had ever married and loved Ludwig, she avowed her own children were not dearer to her than those of others. The man from Marburg heard her say she was ready to follow in the steps of Christ, and he waited. Elisabeth stripped herself entirely naked, and in utter subjection she knelt at the altar. It was the great renunciation—now there was nothing left for Elisabeth but to die. In her twenty-fourth year she passed away, and was buried in the chapel of the hospital she had built at Marburg in memory of St. Francis.

After Elisabeth's death, her confessor was unwearied in his efforts for her canonization, and the documents he gathered for Gregory IX constitute source-material for the life of the saint. Konrad von Marburg was likewise occupied in another direction: he was the first papal inquisitor of Germany, and, now that Elisabeth was gone, he had more time for his larger duties. When Konrad suspected heresy, he served as accuser, witness, prosecutor, and judge. There was no escape from his technique: on the same day that he pronounced sentence, he burned his victim. Ecclesiastics themselves admitted Germany could not breathe, for Konrad struck swiftly in unexpected places, and many of the faithful, without opportunity for defense or hope of appeal, perished in fire. Konrad finally pointed his finger at the powerful Count Sayn; it was a political blunder, and a fatal one. Traveling on his mule, Konrad was waylaid, and while imploring for himself the mercy he had never shown



another, he met a violent death. His body was buried in his native Marburg, by the side of Elisabeth. Then the grand master of the Teutonic Order erected in Marburg, in splendid Early Gothic, the Elisabethskirche to contain the tomb of Elisabeth, and here, too, were carried the bones of Konrad. So they sleep together through the ages, the gentle saint and the terrible inquisitor.

CATHERINE OF SIENA. The woman who married the dyer Giacomo Benincasa was the mother of twenty-four average children, and in her twenty-fifth delivery gave birth to a daughter who perished and a surviving twin-sister who was Catherine of Siena (1347-80). Unearthly with ecstasy from her cradle days, Catherine dedicated her virginity to Christ at the age of seven, and demonstrated that it is not easy to have a little saint in the home: in the midst of a large family, she lived like an anchorite of the desert, she spoke only to her confessor, and ignored the existence of her father and mother. Realizing in time that this was a trick of the Devil, she became a useful member of her own household, and then proceeded to put the households of Italy into order. She was one of those strange combinations of unworldly mysticism and political genius, and as her influence increased she decided to end "the Babylonian captivity of the church," by bringing the pope from the long exile at Avignon back to Rome. Where Dante had failed, and Petrarch had labored in vain, Catherine succeeded.

In her teens, Catherine became a sister of the Third Order of St. Dominic, patterned upon the Third Order of St. Francis: after Francis had founded the friars (Grey Friars, first order), and Clara had founded the nuns (Poor Clares, second order), he established the laity, who could not follow a monastic life but must live in the world, into quasi-monastic groups (the Third Order, or Tertiaries). Dominic was the imitator, Francis always the originator; and the story of Dominic lacked the emotional fire of the Francis legend. Moreover, the Franciscans had the inestimable advantage that only upon the body of their founder had been miraculously inflicted the Five Wounds which Christ received at his crucifixion: after the death of Francis, Clara saw the wounds in his feet, but could not extract the nails which had been driven through them. In the contemporary rivalry between the Franciscans and the Dominicans, Catherine came to the rescue of the latter: Christ put a ring on her finger as proof that



she was to be his heavenly spouse; and, as she knelt in a church in Pisa, she received the crowning glory of the wounds of the Lord. To save herself from pride, she prayed that the sacred marks be rendered invisible: the Franciscans coldly denied, while the Dominicans fervently accepted, the stigmatization of St. Catherine.

Catherine's fame, aside from her visions, rests upon her achievements as a peacemaker in the violent family feuds and between the ever-warring cities of the fourteenth century; the persuasion which resulted in the return of the papal throne from France to Rome; the religious treatises and mystical letters she dictated in the purest Tuscan before she had learned, by a miracle, to write; and on her career as a hospital nurse. Opposite the cathedral of Siena is located the hospital of Santa Maria della Scala, where Catherine attended the worst cases of leprosy and cancer, too repulsive for less devoted hands. When the bubo-plague came to Siena (1374), Catherine no longer needed her little lamp to guide her through the dark streets at night from home to hospital, for she refused to leave the infected wards of La Scala. Under the auspices of the Tertiaries of St. Dominic, Catherine organized groups of young men as stretcher-bearers to transport the stricken to the hospital. In her inscrutable letters, Catherine makes no references to such earthly affairs as nursing; and such Italian masters as Il Sodoma preferred to portray Catherine in a divine swoon rather than in the mundane act of rolling a bandage. Of the nursing saints of the monastic era, the name of Catherine is among the foremost.

HOUSE OF SYON. The Order of St. Bridget of Sweden established the House of Syon near Isleworth on the Thames. Founded in the decline of monasticism (15th cent.), the only Bridgittine convent in England, it nevertheless became the wealthiest of nunneries, and such was its tenacity that when the Reformation scattered all the other nuns in England like leaves in the wind of wrath, the women of Syon House moved to Holland in an unbroken group. Bridgittine communities were double communities of women and men under the direction of the abbess. A set of rules in English (59 chapters) for the sisters of Syon House furnishes detailed information on monastic behavior, the sisters being instructed not only in the paramount matter of religion, but even being told how to handle their knives and spoons and napkins and what to



do with the crumbs on the tablecloth. These rules make monastic life seem as matter-of-fact as boarding-school etiquette. The rules regarding the treatment of the sick (ch. lvii) are of considerable psychiatric interest:

Often change their beds and clothes, give them medicines, lay to them plaisters and minister to them meat and drink, fire and water, and all other necessities night and day, as need requires after the counsel of the physicians, and precept of the sovereign; do not be squeamish in washing and wiping them by avoiding them, be not angry nor hasty, nor impatient though one have the vomit, another the flux, another the frenzy, and now sings, now cries, now laughs, now weeps, now chides, now is frightened, now is wroth, now well *apayde*, for there be some sickness vexing the sick so greatly and provoking them to ire that the matter drawn up to the brain alienates the mind. And therefore those in attendance should have much patience with them, that thereby they may attain an everlasting crown.

SISTERS OF ST. JOHN'S ORDER. In conjunction with the church of Santa Maria della Latina in Jerusalem were founded the hospital of St. John the Almoner for men, and the hospital of Mary Magdalene for women. The nurses lived according to the rules of St. John's Brothers, under the mother superior, the Roman Agnes (1099). When Jerusalem was conquered and cleansed by Saladin (1187), the Sisters retired to Spain, dwelling in the cloister of Sirena, between Saragossa and Lerida. Unfortunately, the location was so unsanitary that the surviving Sisters were obliged to find a humbler but healthier place. At the beginning, the garments of the Sisters resembled that of the knights hospitallers of the Order, being red with an octagonal white cross; after the loss of Rhodes, the Sisters wore black raiment only, as a token of mourning. They worked in Spain, Portugal, France, England, Malta, and elsewhere. The establishment of the Sisters in France was mainly due to the efforts of Guibert de Themines, who built a small hospital at Beaulieu-en-Quercy in the diocese of Cahors (1235). His son, of the same name, enlarged the hospital and gave it to the Sisters of St. John, the first mother superior of the hospital being his wife, Angeline de Maras (1259). After Angeline de Maras passed away, her daughter, Angeline de Themines, succeeded her as prioress (1296).

Early in the seventeenth century, the hospital at Beaulieu lay in ruins, its stones and spirit overgrown with weeds. A youthful prioress, Galiotte de Gordon (1590-1619), seeking to recapture the days of Angeline de Maras and Angeline de Themines, insisted the old hospital be rebuilt,



and that the Sisters again devote themselves to the nursing of the sick. Galiotte de Gordon received a dash of cold water in her face which made her realize that the era of monasticism was over. The *Conseil général de la religion* told her to mind her own business, which was to see to it that the nurses of St. John of Jerusalem said their prayers and gave alms, as the Knights of Malta were doing so piously. At this period, the chief interest of the order, which had grown rich and powerful, was the ancestral purity of its members, which means that it was refuge for scoundrels and degenerates: it was militaristic, ecclesiastic, aristocratic; it was anti-civic, anti-secular, anti-democratic. In the following century, finis was written to the Knights of the Order of the Hospital of St. John of Jerusalem: the vast estates were confiscated and the many corruptions abolished by the purifying storm of the French Revolution. The sisters disappeared without a line from Clio.

EARLY ORGANIZED NURSING. A psalter prepared for the use of Henry VI of England, and preserved in the British Museum, contains a beautiful miniature of Benedictine nuns in their cloister. It is an historic picture, worth study: for a thousand years (A.D. 500-1500), convent life was the only career open to woman. Nowhere else could woman obtain an education, and only under its auspices could she devote herself to charitable work. The position of abbess was held in such esteem that princesses and queens sought it, but the monastery gave even the humblest of its nuns advantages she could not have secured outside. The thirteenth-century author of *Holy Maidenhood* described the nun as the free woman, contrasting her with the slave wife; inversely, the sixteenth-century Erasmus branded the cloistered woman a slave, declaring that only the woman who remained outside was free. The mystic author expressed the view of medievalism; the Dutch scholar, the vision of the renaissance. The new perception does not change the actuality: woman had joined the monastic system from the beginning, and the first organized nursing by woman was nursing under monasticism.



## IV

### Augustinian Nuns of Hôtel-Dieu



THE FOUNDING. When Landericus (Landry) was bishop of Paris, the poor assailed him, and the sick swarmed around him. Now Landericus was a man of mercy, and selling the treasures of the church, he built God's House with an open door for all who suffered. He built for the ages, and his statue stands in the courtyard of the oldest hospital on earth. No hospital in existence possesses the unbroken record of the Hôtel-Dieu of Paris. Augustinian nuns began their attendance at the Hôtel-Dieu: for twelve hundred years immured within these walls, alive, yet not of this world, aloof from the human race, with the breath of God on their faces. To and fro they walked the wards, back and forth throughout the days and years and centuries. In time and space they have outwalked all nursing sisterhoods.

Millions of invalids have passed through their devoted hands, the same hands that covered with the silent shroud an empire of the dead. In the interlude of peace between wars and during the wars, in the season of full granaries and in the time of famine, when health smiled on the land and when the air carried pestilence, in the epochs that had no history and through dynastic changes and national revolutions, the Augustinian nuns, oblivious to all outside their walls, have walked back and forth in the dark corridors.

The Hôtel-Dieu (A.D. 651) was founded in the night of Europe. It was daybreak in the Orient, but no gleams reached the West. There was once a land named Greece, but the seventh century did not remember Hippocrates, and Aristotle was forgotten. A solitary physician, Paulus Aegineta, last of the Greeks, prepared his synopsis at Alexandria, reverently salvaging the heritage of antiquity: "I have compiled this collection from the works of the ancients, and have set down little



of my own, except a few things which I have seen and tried in the practice of the art." Paulus Aegineta looked backward, for only in the Hellenic past could he find a living medical art. Europe slept through the seventh century, intoxicated by God. The ghostly voice of Gregory of Tours was harsh, pronouncing it blasphemy for the sick to consult earthly physicians instead of the shrine of St. Martin. The sacred dust of faith fell on the White Daughters of Christ as they attended the sick at Hôtel-Dieu, without knowledge of the human body or instruction in nursing.

PATIENTS WITHOUT DIAGNOSIS. A nun stood at the open door of this *Domus Dei* (House of God), whose splendid motto, *Medicus et Hospes* (Healer and Host), discriminated against none. The Augustinian sister admitted all who wished to enter, whatever their motive: here came the tired knight and the exhausted serf; the sturdy beggar and the starving scholar; the lightfingered thief and the industrious artisan; the wandering Jew and the Christian from the provinces, lost in Paris; a sick mother with her children, if they had nowhere else to stay. Those who passed within the walls of the Hôtel-Dieu, confessed to a priest and gave up their clothes to a caretaker. Attired in the inevitable nightcap but otherwise naked, the newcomer was placed in a bed with others; for a single person in a single bed was not the custom of the Hôtel-Dieu, or of the homes and inns of that time. More than one in a bed was the rule, and when famine and pestilence filled the wards, several more crowded in, feet opposite faces. No diagnosis was made of the patients, and a blacksmith with a broken leg found himself between a howling lunatic and a case of smallpox; a child awaiting his mother's recovery so he could go home, lay in the same bed with a convalescing alcoholic and a dying consumptive.

THE BEDS. These beds in the Hôtel-Dieu, even when empty, have fascinated generations of chroniclers. The beds were too heavy to move around, and they stood so close together it was impossible to scrub them or scour the adjacent walls. They were four-poster beds, large and high, with bolsters and feather pillows, and straw mattresses resting on ropes. The beds were provided with sheets, and a gray-cloth quilt, each lined with the mixed fur of squirrels, dogs, cats, foxes, and sheep. The quilts were



cleaned and repaired annually, and for this task the service of furriers was required. The wooden beds with the wooden shelves for medicines were ornamented with bedcurtains: white muslin in summer and red serge in winter. Thrice a year, the mattresses were ripped apart, and the straw was changed. At times, the straw served another purpose, as when a zealous Sister used it for fuel in place of firewood that could not be obtained. The renovation of the bedding was a ritual in which the Sisters, novices, and convalescent patients collaborated: when the work was done, they sat down to a banquet, partaking of the various delicacies of the season.

Early in the seventeenth century (1612), an innovation was announced: in response to numerous complaints that if a patient died in the night, it was not pleasant for his bedfellows to sleep with the corpse, it was decreed that every ward should have some spare beds to permit separation of the living and the dead. An excellent rule, though it remained on paper. More than 170 years later, a Viennese surgeon, making the rounds of the Hôtel-Dieu, observed four patients in the same bed: one was convalescing, two were dying, and one was already dead.

**DONATIONS.** The kings of France became the patrons of the Hôtel-Dieu. Philippe Auguste built the St. Denis ward, and Queen Blanche gave it the St. Thomas ward. The straw from the royal palace (during the king's absence) and the royal cradles in which had lain the future rulers of France, were donated to the Hôtel-Dieu. The royal benefactions continued for centuries: when the gallant Henry of Navarre was besieging the city of Paris, which was well worth a Mass, he violated his own blockade by sending large quantities of wheat and wine to the hospital. When a lottery was organized for the benefit of the hospital, with tickets on sale all over the country, Louis XIV bought the first thousand. Under Louis XV, whoever went to a comedy or attended the opera, paid a tax which was turned over to the hospital. Long before this time, it was a rule that all stray hogs captured in the streets—and there were many of them—should become the property of the hospital. Numerous houses were bestowed upon the hospital, which earned revenue from the rent. As few of the inhabitants of Paris could read, the houses were unnumbered, but were known by their signs. The Hôtel-Dieu owned the house with "the crooked chimneys," with "the group of the three monkeys,"



with "the image of the wolf," with "the image of the iron lion," with "the sign of the Golden Lion of Flanders," with "the image of the butterfly," and with "the Cross of Gold."

A history of the times could almost be written from the legal documents in connection with the Hôtel-Dieu. Renaud Crest and his wife Joan, preparing for the journey to Jerusalem, willed their property to the hospital if they never returned from the Crusade. The most diverse of Frenchmen united in contributing to the Hôtel-Dieu:

Everybody left something to the Hôtel-Dieu, from the king to the humblest artisan in his dominion. The Dukes and Duchesses of Berry, Brittany, Artois and Anjou, and the king's barber and his wife, the seller of parchment, the prosperous fish monger, the Captain of the Bastille remembered the Hôtel-Dieu when they came to die. Renaud de Mello presented to the Hôtel-Dieu a house situated near St. Landry. It was doubtless to enhance the rental value of this building that Philippe Augustus decreed that its occupants should be subject only to trial by the king except in cases of murder, homicide, theft, treason, and rape. Unremembered for face or figure, Alice, washerwoman to the Bishop of Paris, has her small niche in the hall of fame, because she bequeathed her accumulated savings to the great hospital for the poor.

It became a national habit to help the hospital which helped all who ventured within its hospitable walls.

**LINEN.** Linen, the earliest vegetable fiber known to man, the white garment of purity of Egyptian priests, the "purple and fine linen" of the Bible, reached its apogee in the Hôtel-Dieu. The records speak often of the hospital linen, seldom of the drug department. Linen merchants from the provinces, passing through Paris, invariably called upon their best customer, the Hôtel-Dieu, which frequently purchased their entire stock. The linen rooms of the hospital were the scenes of constant activity, the sisters cutting, sewing, hemming and repairing clothing, sheets, pillowcases, bedspreads, and bolster covers. It would be impossible to calculate the number of spindles which worked for the Hôtel-Dieu throughout the centuries, but the hospital once listed its current linen as follows: 4,336 sheets; 2,000 bedcurtains, 13,528 shirts and chemises; 1,000 bathing-gowns; 1,571 aprons for medical officers; 13,176 napkins; 13,386 pillowcases; 6,540 towels; 150 tablecloths; 4,332 aprons for Sisters and domestics.

**THE RIVER LAUNDRY.** Such quantities of linen required a gigantic laundry, and it was right at hand. The Seine itself served as the laundry of



the Hôtel-Dieu. Nor was it necessary to hire laundresses, since the work was done by the novices and the Sisters. An old print depicts them, in full costume, standing in the river, washing the hospital linen. When the tide was strong or the river high, a watchman sat in a boat with a hook, ready to save any linen—or laundress—that floated by. The washing was done in all the seasons of the year—by lantern light in the winter—and few heeded the hardships of the Sisters. On at least one occasion, however, the theologian Jean Charlier de Gerson (1363-1429), chancellor of the University of Paris, preaching in the presence of the king (Charles VI, 1368-1422), referred to their plight: "Let us realize how many girls there are at the Hôtel-Dieu who all next winter will stand in the waters of the Seine, frozen up to their knees, in order to wash the clothes of the poor." The patients also suffered from the laundry arrangements: when the balconies were inadequate to hold all the wash, the wet clothes were hung in the unventilated wards, causing the bedridden to grumble about the ensuing dampness.

AUGUSTINIAN NURSING. It is difficult to deduce from the records what instruction the Sisters of the Hôtel-Dieu received for the improvement of the nursing of the sick, or to what degree it differed technically from general, domestic nursing. Their clinical experience was certainly extensive, for patients were coming and going all the time. The Augustinian nuns could have obtained considerable outside practice if they had been permitted to leave the hospital freely, and they were also in demand as teachers in other institutions. Yet there was no progress in their training, and if the first group of Sisters had reappeared in the hospital a thousand years later, they could have continued their duties where they had left off. Familiar to their ears would have been the complaints of the governors that the Sisters are more interested in prayer and meditation than in the welfare of the patients; they neglect to give them medicines and enemas, and do not wash them and feed them, neither cut their hair nor pare their nails; as they pass from bed to bed, "looking without seeing," they fail to prepare the shroud or lay out the dead. The returned Sisters would hear the voice of a venerable Sister, "The novices of today are quite unendurable. They are to be found in the confessional rather than by the bedsides of the sick and dying"—and that, too, had been heard a thousand years before.



THE MIDWIVES. More specialized than the general nurses of the Hôtel-Dieu were its midwives. In fact, one of the favored methods of becoming a French midwife was to serve an apprenticeship in the Hôtel-Dieu. The home of the earliest maternity wards, the Hôtel-Dieu long retained its leadership in this department of medicine. From the Hôtel-Dieu came the two midwives (1428), experienced in such matters, to determine the virginity of Joan of Arc. The school for midwives at the Hôtel-Dieu was famous, but, unfortunately for the patients, and perhaps for the pupils, the belief prevailed that the bulging bellies of prospective mothers were unaesthetic, and hence the maternity wards were located in the damp basement of the hospital. The conviction that childbed fever was an act of God, relieved the medical profession of all responsibility for centuries—even the responsibility of washing its hands. In the epidemic of puerperal sepsis in Paris (1660), two-thirds of the lying-in women in the Hôtel-Dieu died in the hour that they awaited birth. The mortality was not regarded as excessive, and such was the ignorance of the true cause of childbed fever that two hundred years later various institutions closed their doors because practically all the parturient women succumbed to sepsis. The midwives of the Hôtel-Dieu, who had long blocked the path of any male physician attempting to enter the maternity wards, could not throw even a candlelight into this impenetrable darkness. It remained for a scorned he-midwife of another land to solve the fatal secret.

AN AMERICAN VISITOR. Asthma has numbered among its victims many eminent members of the medical profession, including John Jones (1729-91), born in Jamaica, Long Island. The pure air of his native village increased the spasmodic contraction of his bronchi, and nowhere did he find such alleviation as in the fogs of London. Despite his disability, Jones was one of the most successful of the colonial physicians: Franklin and Washington were among his patients; one of the earliest of American lithotomists, he could remove the stone in a minute and a half; the first professor of surgery in the medical department of King's College of New York, he was likewise one of the founders of the New York Hospital and of the College of Physicians of Philadelphia; when trouble started with the mother country, even prior to the signing of the Declaration of Independence, he issued the first American book on mili-



tary surgery. A few years before the Revolution, Jones was abroad, buying medical equipment for King's College, and studying European hospitals. Naturally, he visited the Hôtel-Dieu, which he described (1772) as follows:

The Hôtel-Dieu, a vast building situated in the middle of the city, receives about 22,000 persons annually, one-fifth of whom die every year. It is impossible for a man of any humanity to walk through the long wards of this crowded hospital without feeling a mixture of horror and commiseration at the sad spectacle which presents itself. The beds are placed in triple rows, with four and six patients in each bed, and I have more than once in the morning rounds found the dead lying with the living; for, notwithstanding the great assiduity and tenderness of the nurses, some of whom are women of family and take the veil and piously devote themselves to that office, it is almost impossible, from the vast number of patients, to bestow timely assistance upon each individual.

TENON'S DENUNCIATION. In *Mémoires sur les hôpitaux de Paris* (1788), Jacques-René Tenon portrayed the Hôtel-Dieu with the same pathological precision with which, previously, he had described cataract. Although Tenon's professorship of pathology was not intended to include social pathology, he devoted much time to this aspect of the subject.

He traced scabies from the recesses of the Hôtel-Dieu to the homes of Paris:

Drinking cups, rinsed in haste, are passed from patients who have the itch to those who are free from it. A new patient is often placed in the bed of an itch patient who has just died, the sheets being unchanged. The itch is almost general and perpetual at the Hôtel-Dieu, the surgeons, nuns, and hospital attendants contracting it in caring for the patients and in handling their linen. Discharged patients carry it to their families. The Hôtel-Dieu is the undeniable source from which this disease spreads in Paris.

He noted the social custom of performing trepanation and other surgical operations in the midst of the patients: "The operating ward, where they trepan, where they cut for stone, where they amputate limbs, contains not only those upon whom operations are being performed, but those who have already undergone them, and others who are awaiting their turns. The operations are performed in the middle of the ward; one can see the preparation of the victims and hear his cries of torment. He who is to be operated on next day has before him a picture of his future sufferings in those of him who has just passed through this terrible ordeal."



In a charming vignette he lifted the curtain of the lying-in chamber of the Hôtel-Dieu: "The ward of St. Joseph is reserved for pregnant women; honest or vicious, healthy or unhealthy, they are all together. Three or four women in this state lie in the same bed, exposed to insomnia, to contagion from their diseased neighbors, to the risk of injuring their children. The women, after delivery, also are put four or more in a bed, in various stages of recovery. The gorge rises at the idea of this situation, where they mutually infect each other. Most of them either die or go out diseased."

The classic straw of the Hôtel-Dieu really aroused his Gallic eloquence:

Besides all the other causes which tend to infect the air of the hospital, when the straw of the beds has to be changed, there is no special place for doing this; it is done consequently in the middle of the wards. When these straw mattresses whereon so many different sorts of diseased patients have been lying are opened, one can imagine the odor that is exhaled. Further, in each ward loose straw is used for the dying patients and those that soil their beds. Sometimes five or six are put together on a pile of straw, which is placed on a bed and covered with a sheet. It sometimes happens that a newcomer is placed among these dying or filthy patients until a permanent place for him is decided on. One must be at the Hôtel-Dieu at four o'clock in the morning when they take out the infected straw by armfuls, and throw upon the floor that which is reeking with impurities and loaded with filth, to judge of the infection which spreads throughout the wards and the stairway on all the floors. A thousand factors, special or accidental, add each day to the ever-present causes of the corruption of the air, and force one to the conclusion that the Hôtel-Dieu is the most unhealthful and most dangerous of all hospitals.

Tenon's exposures created a sensation throughout France. There were many indignant protests, calling for a change. Committees were formed, and considerable sums were collected to improve the old hospital. The affair could not be kept secret from the king, and Louis XVI ordered a separate bed for every patient. Excellent rules were formulated on paper. In time the agitation grew fainter, the funds were diverted for other purposes, the king forgot to provide separate beds, and Tenon's *Mémoires* became another book in the library. In his old age, Tenon saw some of his suggested reforms actually put into practice. Tenon's capsule and Tenon's space are eponyms in the anatomy of the orbit, and Tenon's denunciation is a landmark in the history of hospitals.



SCIENCE IN THE HOSPITAL. Pliny's remark, that for six hundred years the Romans had no physicians, is equally applicable to the Hôtel-Dieu: established in the seventh century, it was not until the thirteenth that the hospital arranged for definite medical and surgical service. If the disciples of Aesculapius, upon their appearance at the hospital on the Seine, expected to be welcomed with open arms by the Sisters, they were soon undeceived. The Augustinian nuns acknowledged no authority on earth except that of their ecclesiastical superiors, and throughout the centuries they flouted the instructions of the doctors. If the prioress disliked post-mortems, as she usually did, it was difficult to perform an autopsy in the hospital. If the Sisters were opposed to venesection or blisters or emetics or mineral waters, they hindered the doctor's orders. Later on, if the Sisters were prejudiced against the new drugs from the New World, such as cinchona bark, the doctor's prescription was torn up before one could read beyond the *R*. Despite these obstacles, the hospital became a medical center, and those who graduated in medicine at Paris received the coveted robe of the magister, in the Hôtel-Dieu.

It is not known how Ambroise Paré (1510-90), even before he received his diploma as a barber-surgeon, became house surgeon in the Hôtel-Dieu, or how a barber-surgeon received an appointment in any case. Paré was in charge of patients, he succeeded in doing dissections and performing post-mortems, and he taught students. Paré, not only the future father of French surgery, but also the greatest diplomat in the history of surgery, got along with everyone: when the time came for him to leave the hospital, the students rioted, just as, at a later time, the soldiers rose in tumult if Paré went away. It is known that Paré was proud of his association with the hospital, for in his famous *Journeys in Diverse Places* (1537-69), he relates that a distinguished physician said to the Lord Marshal, "Thou hast a surgeon young in age, but he is old in knowledge and experience; take good care of him, for he will do thee service and honor." Whereupon Paré complacently adds: "But the good man did not know I had lived three years at the Hôtel-Dieu in Paris with the patients there."

Since that time, leading medical men of France have been associated with the Hôtel-Dieu: François Mauriceau (1637-1709), known as the oracle of obstetricians, who corrected the ancient belief that the pubic bones separate in labor, and demonstrated on a young wench who lay



in the hospital that syphilis can be treated successfully during pregnancy; Pierre-Joseph Desault (1744-95), the farmer's son who had no collegiate education, yet made important contributions to surgical culture, and when establishing the first surgical clinic in the Hôtel-Dieu did not neglect the sanitary aspects; François Chopart (1743-95), whose name survives in Chopart's amputation; the short-lived genius, Marie-François-Xavier Bichat (1771-1802), the founder of histological anatomy; Guillaume Dupuytren (1777-1835), the glory and the disgrace of French surgery, whose talent raised him from beggary to the rank of a baron-millionaire, unrivaled in dexterity and brutality, who advanced our knowledge of surgical pathology and operated with dramatic brilliance, but was callous to suffering, cursed and struck his patients, had a favorite trick of making a handle of a man's nose and pulling him down to his knees, gave a mother a tremendous kick in the rump because she was worried over the fate of her son, and deserved the two epithets which his countrymen bestowed upon him—the Napoleon of surgery, and the brigand of the Hôtel-Dieu. Medicine at the Hôtel-Dieu was redeemed in the personality of the clinician, merciful to patients and generous to colleagues, the warm-hearted Armand Trousseau (1801-67), author of the widely-known *Clinique médicale de l'Hôtel-Dieu*.

Then came the day when the Hôtel-Dieu opened its never-closed doors to strange patients indeed. Nineteen Russian peasants from the distant province of Smolensk, badly mangled by a raving wolf, some of them torn beyond recognition, began a mysterious pilgrimage to Paris. These muzhiks knew only one word of French, but that word was "Pasteur." There was no place for them except in the Hôtel-Dieu, and here they were visited by the kindly chemist with his talisman that hung by a thread in his magic flasks. Their journey had been regarded as their last, and when sixteen of them returned, in health and high spirits, to Smolensk, their restoration was looked upon as a resurrection. It was one of Louis Pasteur's crucial experiments in the conquest of hydrophobia. In his visits to the hospital, Pasteur saw the Augustinian nuns of the Hôtel-Dieu walking through the corridors in the nineteenth century as they had walked since medievalism. In appearance and in outlook they had changed little, seemingly unaware of dynastic upheavals and medical revolutions. The elderly, limping, partly paralyzed man in the black skullcap had gained an immortal victory for science, but it was only an



incident in the life of the hospital. The faith of Pasteur was the faith of the Sisters, though one was the symbol of science and the others knew no science. Within a few years the tired Pasteur crossed the river, and the Augustinian nuns, as in ages past, continued to walk the wards of the Hôtel-Dieu.

THE END. The hospitals and schools of the republic of France underwent laicization. A freethinking physician from Normandy, Désiré-Magliore Bourneville, was the nemesis of the nuns. City councilor and hospital reformer, he never forgot or forgave an incident of his internship: during an operation, the elderly Sister who passed the instruments to the surgeon, covered her eyes to conceal from her view the imperforate anus of a newborn child. Bourneville claimed the vows of the nuns made it impossible for them to become modern nurses: the chapel was more important than the operating room; the prior was superior to the physician; when a patient is believed to be dying, send for the priest instead of the doctor; it is wrong to cure venereal disease, or to attend unmarried mothers; the knowledge of the functions is improper, and the study of anatomy is sinful. Bourneville, in the day of his power, banished the Sisters from all the hospitals of Paris until they could be found only in the Hôtel-Dieu. Finally, as his crowning achievement, he determined to end the nursing existence of the oldest sisterhood of the oldest hospital.

It was cold in the courtyard of the Hôtel-Dieu (January 1908). The Sisters stood in silence, unmindful of their indignant partisans and the slightly embarrassed police outside the walls. There was tenderness in the tones of the director-general of public health, but he had to do his duty; no one knew better than he how long and faithfully the Sisters had served the sick in the Hôtel-Dieu, but in the new era of the hospitals of France all the religious sisterhoods had gone. They who had been the first had been permitted to be the last, and now it was their turn. Of course, if they would conform to the new age of science, they could remain. The Sisters listened to the decree of banishment, and did not reply. Carriages waited for them beyond the courtyard. Their wrathful champions wanted to unhitch the horses and pull the Sisters in the vehicles through the streets of Paris, but the police halted their enthusiasm. Voices in the crowd cried out, "Down with the Republic!" The police arrested those who were looking for a fight. The Sisters did not say a word. In silence



they stepped into the carriages, and the coachmen whipped up the horses. For the first time in twelve centuries there were no Augustinian nuns in the Hôtel-Dieu.

EPILOGUE. At the end of the drama, the final curtain descends. Yet the curtain rises again if there is an epilogue. Mysterious women, silent as statues, appeared in the training schools established in the Hôspices of Bicêtre and la Salpêtrière. At first they were few, and they came in secular attire, but Bourneville recognized them as nuns seeking the new learning in nursing. Later they arrived in greater numbers from their cloisters, and without disguise. They found that a knowledge of disinfectants, and the study of materia medica and obstetric nursing were not offensive to God. Religious and non-religious nurses received the same instruction and took the same examinations. There are many creeds, but in disease there is no sectarianism. So the Augustinian nuns prepared for the state board, obtained the state diploma, and became members of the national organization of nurses. They were thus able to return from exile to the familiar wards of the Hôtel-Dieu. It is doubtful if the Augustinian nuns will ever erect a monument to their arch-enemy Bourneville, but they owe much to this implacable man: when he drove them out of the Hôtel-Dieu, they were medieval figures in the twentieth century; they came back with the healing hands of modern nurses.



## V

### The Women of Vincent de Paul



THE SHEPHERD OF POUY. A child of French peasants was minding the flocks in the parish of Pouy. One day, the boy's father told him he need no longer watch the sheep, for he was sending him to the Franciscans at Dax for an education. In time, the boy received the tonsure and entered the University of Saragossa for a degree, but soon exchanged this school for the University of Toulouse. He was exceedingly poor, and his family shared with him all they had; on one occasion, his father sold a yoke of oxen and sent him the proceeds. The boy became a youthful deacon and was ordained priest, but thirsting for theological knowledge, continued his studies. His debts harassed him, but suddenly he received good news: a woman of rank, devout and wealthy, had died and made him her heir. When the needy young priest hastened to claim the estate, disappointment awaited him: there was no doubt of the lady's piety, but her fortune had been exaggerated, since it consisted of some furniture and a few pieces of land. The most valuable item in the legacy was a debt, but this could be collected only if the debtor could be found.

JOURNEY TO MARSEILLES. It was ascertained that the debtor was enjoying himself at Marseilles, and seemed to have plenty of money. Whereupon the priest's lawyer advised him to go to Marseilles, put the man in prison, and collect the debt. Now, the priest had no cash for the journey, but he had hired a horse at Toulouse. The horse was not his, but he figured if he sold the horse, he could pay for it on his return with the money he collected from his prisoner. So the priest sold what he had no right to sell, got to Marseilles, caught his man, jailed him, bargained with him, and received three hundred crowns on the spot. The priest was preparing to return to Toulouse by coach, until another traveler



suggested: "Why not go by sea to Narbonne? We are due to arrive in the harbor by evening." The weather was splendid, the Mediterranean inviting, but the priest disliked the sea; nevertheless, he decided to go by boat because it was cheaper. He embarked on a ship that never reached port.

MEDITERRANEAN PIRACY. At that time (1605), the whole fiber of Europe was so weakened by the wars of religion, waged in the name of the Prince of Peace, that Turkish pirates and Moorish corsairs dominated the Mediterranean. The business was extremely profitable, and Tunis and Algiers had become auction blocks where the captives of all nations were held for ransom or sold into slavery. Three Turkish brigantines spied the vessel on which the priest from Toulouse was sailing, and immediately gave chase, killing some of the passengers and wounding the rest. The priest himself was struck by an arrow, which left its mark for life. The helpless ship surrendered to the Turks, who promptly cut the captain into pieces for his resistance, but dressed the wounds of the others, as they were reserved for slavery. The pirates cruised leisurely for a week, picking up much loot on the way, and then steered for the coast of Barbary.

A SLAVE OF THE TURKS. In a personal letter, the priest has described his experience as a slave of the Turks:

This was how they set about disposing of us. After having stripped us naked, they bestowed on each of us a pair of breeches, a linen doublet and a cap, and marched us through the streets of Tunis, whither they had come in order to sell us. After having perambulated the town five or six times with chains round our necks, we were taken back to the boat for the dealers to come and see who could eat and who could not, by way of proving that our wounds were not mortal. When this was over they led us into the market-place, where the dealers came and inspected us precisely as one does when one is buying a horse or an ox, opening our mouths to examine our teeth, feeling our sides, probing our wounds, making us walk, trot and run, carrying burdens the while, then setting us to wrestle in order to judge of our respective strength, and indulging in hundreds of other brutal proceedings.

A fisherman bought the priest, and found it was a bad bargain, for the slave and the sea could not get along together. The priest's next master was a kind-hearted, learned, befuddled, old alchemist who grew very



fond of his captive, and showed him a coil he had devised to make a skull speak and thus delude the people; while the priest kept the fire going in a dozen furnaces—an occupation which somehow gave him considerable pleasure—the old Turk discussed geometry with him, and elucidated the mysteries of Archimedes' mirror. The master himself was suddenly enslaved; seized to work for the sultan. The priest was left to the nephew, who soon heard that the French ambassador in Turkey was inquiring about Christian captives, so to avoid argument he sold the priest to an Italian who had become a Turk in order to enjoy the delights of polygamy.

**THE ESCAPE.** The priest was carried off to the mountains, where he sweated and toiled for the Italian-Turk and his three wives. One of these wives, curious to know the way of Christians, came often to watch the priest digging in the fields. He worked well, for he was a son of the soil. One day she commanded him to sing the praises of his God. The priest thought of the children of Israel in captivity: "How shall we sing the praises of the Lord in a strange land?" With tears in his eyes, he chanted the Psalm: "By the rivers of Babylon," and the woman stood in the fields, utterly fascinated. The priest has said this Turkish woman was "another Balaam's ass," for she rebuked her husband for abandoning his religion. The husband, who had evidently had enough of Mohammed, and perhaps of polygamy, whispered to the priest that they would escape as soon as possible. In time, the repentant renegade obtained a little skiff from which he and the priest landed safely at Aigues-Mortes in France. The contrite and sobbing Italian became a Christian again, and after eighteen months of serfdom the priest was back in his native land (1607). His name was Vincent de Paul (1576-1660).

**CHAPLAIN TO QUEEN MARGOT.** The wheel of fortune continued to turn in unexpected ways for Vincent de Paul. A pleasing and prolonged sojourn in Rome devoted to theological study was terminated by his departure for Paris on a secret mission to Henry the Great (1609). Several times, Vincent was admitted to an audience with his king, one year before the most gallant and popular of French monarchs was assassinated by a religious fanatic. Henry's first wife, Margaret of Valois, known as Queen Margot, had her marriage forcibly annulled by the pope when her husband came to the throne; the divorced queen, shining in her palace



in the Rue de Seine, enveloped by the fashion, frivolity, literary wit and artistic brilliance of Paris, is noted for her beauty, learning, generosity, easy morals, and charming memoirs. She offered, and Vincent accepted, the post of chaplain to her household (1610). The peasant-priest now moved in the highest society, and we are told he learned to sympathize with the troubles of the rich and the difficulties of the cultured.

**CURÉ OF CLICHY.** At this period Vincent was living with the Congregation of the French Oratory, founded by the cardinal-statesman, Pierre de Bérulle, who introduced the Carmelite nuns into France. Bérulle took a hand in the destiny of Vincent, and had him appointed curé of Clichy (1612). Diffident at first, Vincent soon plunged into his new duties with joyous ardor, erecting a church which is extant, supporting and educating poor boys in his home, bringing food to the hungry, giving money and clothing to the destitute, attending the sick and cleaning their dwellings, all in inexpressible happiness. It required the command of Bérulle to tear Vincent away from his parish for his next assignment. His eyes wet with tears, the priest with the patched cassocks put his few belongings in a handcart, and found himself installed (1613-17) as tutor and spiritual adviser in the dazzling palace of the Florentine family of Gondi. As Albert de Gondi had been an instigator of the Massacre of Saint Bartholomew he was naturally a favorite of Catherine de' Medici, and in Vincent's time Philip Emmanuel de Gondi was one of the wealthiest and most powerful nobles of the French court.

**HOUSE OF GONDI.** Vincent was brought into the household of Gondi primarily for the violent-tempered children, but the parents took him for their own. The elder Gondi constantly sought his advice, and Mme de Gondi would not have any confessor except Vincent. They leaned so heavily upon him that, after five years in their service, Vincent resigned. Gondi was in despair, and Mme Gondi complained, "Monsieur Vincent has always been so charitable to my soul, that I could not suspect he would leave me in such a manner." Mme Gondi, by birth Marguerite de Silly, was the owner of several villages, but material possessions counted for nothing if one's soul was lost. In her effort to save her own soul, it did not occur to Mme Gondi that there were others whose souls likewise deserved saving. The Gondis could not help but feel that



Vincent was guilty of ingratitude, but they were determined to get him back, since their salvation depended upon it.

CURÉ OF CHÂTILLON-LES-DOBES. After Vincent de Paul decided to let Madame de Gondi take care of her own soul, he was appointed curé of the out-of-the-way village of Châtillon-les-Dombes in La Bresse. The little town, like its neighbors, lay in ruins, a victim of the religious wars. The peasants of the vicinity were ignorant and impoverished; the noble families were rapacious, turbulent, licentious. Moreover, according to the biographers of Vincent de Paul, the whole district was infested with heretics, in other words, with Protestants. Vincent de Paul began preaching to the people, and the simplicity and sincerity of his method, which was really irresistible eloquence, turned numbers of Calvinists into Catholics.

One day, the Comte de Rougement created a sensation by striding into the church, bent on mocking the new village priest. The bully of the neighborhood, the Comte de Rougement was notorious for the looseness of his morals and the violence of his temper. The most expert duelist for miles around, equally profligate and pugnacious, he hunted women with the sword, and killed any man who stood in his way. Such was the devil's spawn who had come to tease Vincent de Paul, but at the conclusion of the sermon the count flung himself at the feet of the priest, weeping in abject humility. He sold the château which had been the scene of so many abominations, and with the proceeds gave alms to the poor and founded monasteries. He determined to give away everything, in order to resemble the Savior who had nowhere to lay his head, and he would thus have beggared himself had he not been forbidden by Vincent de Paul. The count was as ardent in his new life as he had been in the old, crying aloud: "I cut, I break, I shatter, for I am taking the shortest road to Heaven." Dismounting from his horse, the count gazed in farewell at his sword and made the supreme sacrifice: against a rock he broke the blade which had so often tasted human blood, and exclaimed in ecstasy, "Now I am free!" It was one of the most famous conversions of the century.

CONFRATERNITY OF CHARITY. Among other notable converts were Madame de la Chassaigne and Madame de Brie. Members of the nobility, they



were wealthy, beautiful, frivolous. Curiosity led them to visit the preacher; whereupon, he exhorted them to give up their present way of life, to become good Catholics and seek God through works of charity. They became zealous disciples, aiding the poor and nursing the sick. When a plague, ravishing France, found the little town of Châtillon-les-Dombes, the two ladies whose lives had been dedicated to pleasure, attended the plague-stricken by day and by night, fearless of infection and heedless of their own comfort. On one occasion, when the priest was about to say Mass, these women entreated him to call to the attention of his congregation a family in distress, all of whose members were sick and in whose home there was nothing to eat. In an appeal of this nature, no one in France could touch the heart of a peasant audience like Vincent de Paul. After the sermon, he waited awhile, and then walked to the cottage of the distressed family. On the way, he passed a line of his parishioners, going in the opposite direction. Entering the hovel, where a few hours ago there had not been a crust of bread, he saw it overflowing with the produce of the good earth. Though they gorged themselves, the sick and starving family could not possibly devour all they received.

Vincent de Paul took in the situation at once. "There is a great deal of charity," he said, "but it is ill-regulated. Those poor sick people, being provided with too many provisions at once, will let some get spoilt and wasted, and then they will relapse into their original state of destitution." Calling Madame de Chassaigne and Madame de Brie to him, he outlined a course of action. As he explained at one of his conferences: "I suggested to them to club together in order that each lady in turn should provide a day's food, not only for the sick above mentioned, but also for those who would be ill in the future. That is how *la Charité* was established." He then drew up a set of rules, differentiating the deserving poor from the professional beggar, and insisting that organized aid is the function of the public. Châtillon-les-Dombes was thus the birthplace of the first Confraternity of Charity (*Confrérie de la Charité*). Since this work ultimately spread over the world, the day on which the rules were formally promulgated (December 8, 1617) is a memorable date in the chronology of charity.

THE GALLEY SLAVES. The Gondis brought so much pressure, from so many sides, to bear upon the curé of Châtillon-les-Dombes that Vincent



soon returned, this time to remain for eight years. It was during his second stay at the house of Gondi that Vincent discovered the galley slaves. History is a succession of chapters of horrors, and one of these chapters is headed "The Galley Slaves." The infamy flourished mainly in France, chiefly during its period of intensest piety. Some of the convicts were guilty of serious crimes, others had committed trivial offenses, and numbers were accused of being Huguenots. Official documents testify that many of the prisoners were kept long years after their term was over, because the state wanted rowers for the galleys of war. Every effort was made to dehumanize these men and turn them into mad beasts. They were branded, chained, crowded in dungeons; their bodies became infested with vermin and covered with ulcers; they were lashed with long whips as a matter of discipline, and, when they died, they were thrown into the sea.

Vincent observed the life of the galley slave, and must have realized that his treatment as a Turkish captive had been mild in comparison. He resolved to appeal to the General of the Galleys. This was not difficult as Vincent lived in his home: the General of the Galleys was Gondi. An honest courtier in a corrupt environment, Gondi was so sincere a Christian that the day came when he relinquished his power, his fortune, and his name, to bury himself in the anonymity of the priesthood, but it never occurred to him that he could or should do anything to ameliorate the lot of the galley slaves in his charge. They had been mercilessly flogged before he became their commander, and he neither increased nor decreased their punishment. Like most of his contemporaries, he was so deeply concerned about his status in the next world that he did not think about changing the present one. It was the peculiar distinction of Vincent de Paul that his preoccupation with heaven opened to him a wonderful vision of social reform on earth.

Vincent began to work for the relief of the galley slaves, under the authorization and with the cooperation of Gondi. Vincent could not remove the chains of the convict rowers, but he brought them the solace of religion and the comfort of food; he attended them in sickness, and with his own hands picked the lice from their bodies. His success was so sensational that it became the fashion for the well-born of Paris to visit the prisons of the *galériens*, and to leave donations. With the funds collected Vincent purchased a house in the Rue St. Honoré, in which he



founded his first hospital (1619). Even the passive king, Louis XIII, contributed, and by letters patent appointed Vincent, chaplain-in-chief of the royal galleys, with the rank and rights of a naval officer. If Vincent hated anything in this world it was the sea, and circumstances made him the spokesman of the slaves of the sea.

Vincent traveled throughout France, visiting the dungeons of the prisoners. In the company of Gondi he reached Marseilles (1622), the headquarters of the galleys of the damned. He conceived at once the idea of an immense hospital, though a decade passed before he was able to achieve his object with the aid of Cardinal Richelieu and the Duchesse d'Aiguillon. It was at Marseilles that Vincent saw a youthful galley slave being torn from the enfolding arms of his weeping wife. . . . The prisoner sat down on the bench and averted his face as the irons were fastened to his legs, which had suddenly grown old and thin. He began to row with a strange ardor, and a smile of joy illuminated his countenance. A guard recognized him, and took the oars away from Vincent de Paul. He had exchanged places with the real prisoner, giving the amazed galley slave an opportunity to escape. When the people of the seaport heard what had happened, they wanted to carry Vincent on their shoulders in a triumphal procession through the town, and for that reason he left Marseilles, secretly. The tale is told in different ways and it may be a legend, but it is a beautiful one and characteristic of its hero.

LEPERS AND LUNATICS. In Vincent's time, the priesthood of France was notoriously depraved. A bishop informed Vincent that the seven hundred clergy in his diocese repeated Mass daily, but they were drunken, immoral, and ignorant. Vincent himself drew this picture of the priests: "Many of them are quite useless; they recite their Breviary, celebrate their Mass, and that very badly; some administer the Sacraments in a so-so manner, and that is all; but the worst is that they are in a state of vice and disorder." A monastery or convent was the safest rendezvous for the gamblers and debauchees of Paris. The reforming zeal of Vincent de Paul impelled him to change the clergy, and he trained twenty thousand young men who became the theological leaders of the next generation. All of his disciples, like the eminent Bossuet, were impressed by "the simplicity, the wonderful simplicity of Vincent de Paul." In the course of his work Vincent became head of the priory of St. Lazare (1632), whose



extensive buildings were enclosed in a spacious park, and his missionaries have since been known as Lazarists or the priests of St. Lazare. The priory was originally a lazar-house or leper hospital, and Vincent had consented to take charge of the institution on the condition that it would admit any lepers, remaining in France, who sought its shelter. Hidden at the end of the priory's grounds, Vincent found some small buildings in which a number of insane people were kept. He lavished his love on them, and used to say that if he were compelled to leave the priory of St. Lazare, what he would find most difficult to give up would be those lunatics in their little garden-huts.

THE WHITE CORNETTE. Not since widows and virgins gathered around St. Jerome (340-420) in Rome and in Bethlehem, studying Hebrew with him, founding hospitals in the Eternal City and establishing monasteries in the Holy Land, had there been a celibate so successful with women as Vincent de Paul. The harsh tyrant Jerome had his Albina, Marcelle, Paula, Julia, Marcellina, Sophronia, Felicita, Asella, Melania, Blesilla, and Fabiola; the benevolent Vincent had his Mesdames Gondi, Chassigne, Brie, Goussault, Aiguillon, Lamoignon (Mother of the Poor), Pollalion, Miramion, Jeanne de Chantel (canonized 1767), Charlotte de Ligny, and Louise de Marillac (Mlle le Gras). Most closely associated with Vincent in his work, co-founder, with him, of the Sisters of Charity and their first Superior, was Mlle le Gras. Of all the institutions which this man of mercy left behind him, the most important is the Sisters of Charity: "When the name of Vincent de Paul is uttered, the white cornette of the Sisters of Charity rises before the mind's eye."

THE FIRST SISTER OF CHARITY. Marguerite Nazeau was a young shepherdess who watched her flocks grazing in the pasture, and held a mystery in her lap. It was a simple book, but to her a sealed book, for no one had taught her to read. She asked everyone she saw the meaning of the enigmatical symbols, and gradually the letters formed words which spoke to her. After learning to read, she became a traveling school-teacher in the rural districts, and although so poor that often she did not have enough to eat, she gave instruction without payment. During one of his apostolic journeys across France a graying man in a battered chapeau met the young girl, and these two recognized their kinship. Vincent de



Paul brought Marguerite Nazeau to Paris, and placed her under the tuition of Mlle le Gras. The happy Marguerite redoubled her zeal, and was beloved for the purity of her character and for her devotion to the unfortunate. She did not hesitate to take into her little lodging a woman sick of plague, and this good deed caused her death. The disciples of Vincent de Paul called the young martyr "the first servant of the poor," and she may be regarded as his first Sister of Charity.

**THE MOTHERHOUSE.** As the number of Sisters of Charity increased, they were scattered in various places, in none of which was it convenient for them to come together for their daily instruction. Vincent chose a house to serve as a center, and it was an historic day when Mlle le Gras walked over the threshold (Nov. 29, 1633); the house was entered through a low door leading to a dark passage, the house itself was old and poor, but its address was world known for centuries, for the little house in the Rue St. Victor was the Motherhouse of the Sisters of Charity. The majority of the Sisters were peasant girls, and in those days the peasant girls of France could not read a line. Vincent said to them: "You see, my Sisters, the greater number of you are rough girls, brought up in rusticity, like myself, who in my youth used to keep flocks." In the dark age of nursing, these illiterates under the guiding hand of Vincent de Paul wrote a new chapter in the care of the suffering.

**LOUISE DE MARILLAC.** Vincent was obliged to restrain the first Superior from excess of work and intemperance of piety. This woman of grief, Louise de Marillac, whose distinguished relatives died in prison and on the scaffold for political reasons, had married Antoine le Gras, a bourgeois, and during the long years of her widowhood was known as Mlle le Gras, as the title Madame was then reserved for women of the upper classes. Vincent watched over her health, saying she looked as if she had come out of the grave; and he would not permit her to give away everything she had, for he did not like beggars. Controlled by his scoldings, she remained the invaluable head of the community for over a quarter of a century. Vincent was also constantly obliged to resist the pressure of the Sisters who desired to take vows like nuns. His percipience looked beyond the cloister. He wanted his Sisters, or Daughters as he often called them, to go everywhere and at any time where there was human misery



to be relieved. Vincent de Paul stepped over the prejudices of his period when he emancipated the Sisters of Charity from the confines of the cloister.

**MEDICAL AUTHORITY.** Unlike other priests, Vincent insisted that the nurses follow the instructions of the doctors because of their superior knowledge:

You should act, my Sisters, with respect and obedience towards the physicians, being on your guard not to find fault with their orders, but always fulfill them with exactitude. The life of the patient may depend upon the fidelity and accuracy with which you execute these orders, and never should you presume to prepare or administer medicines according to your own notions. Because the doctors are familiar with you, or talk freely to you, does not mean that you should refuse to show them the honor which is their due. Do not undertake to judge among physicians, saying that this one is more successful than that one. It is only your ignorance which hinders you from knowing why the doctors follow several methods in the treatment of diseases which seem to you to be the same, and yet are not the same. The doctors are above you and better instructed than you, and they know many things that you do not.

**NURSING IN THE HOME.** Long before Vincent's time, devoted men and women attended the sick poor in hospitals; some hospitals distributed medicines to patients in their homes, and visited them on special occasion, although this was not the rule. The Sisters of Charity formed the first organized group which made a practice of nursing the sick in their own homes. While informing the Sisters they were the pioneers in this work, Vincent could not help wondering why God had not thought of it before:

There were, indeed, religious men and hospitals for the assistance of the sick; there were also religious women who were consecrated to God to serve them in the hospitals; but until you came, there was not found a community which dedicated itself to the service of the sick in their homes; and if in a poor family anyone fell sick, he was sent to the hospital, and thus was parted the husband from his wife, and the children were separated from their father and mother. O my God, until then Thou didst not furnish means of going to assist them in their homes, and it seemed in some manner that Thy adorable providence, which fails no one, did not extend its care to them.

**STREETS AND HOSPITALS.** The highest artistry is hidden in the simplicity of Vincent de Paul's messages to his early Sisters of Charity:



My daughters, you are not religious in the monastic sense, and if there are meddlesome ones among you who sigh it is better to be a nun, then you are prepared for extreme unction. Do not do it, my daughters, never permit such a change. You cannot be confined like nuns, because you must go everywhere in the service of the poor. Your danger is greater than that of nuns, your security is less, and therefore you must be holier than nuns. The nuns have a screen to shield them from the temptations of the world, but you must erect one within yourselves. You have no chapel, except the parish church; your only veil is your modesty. Nuns need a cloister, but the Sister of Charity must go everywhere. Your cell is a hired room, and you have no cloister except the streets of the city and the halls of the hospital.

LADIES OF CHARITY. Described as "a young and beautiful widow," and as a "most devout lady, full of prayer and holy joy," Madame Goussault was another woman who gravitated to Vincent de Paul. She brought to him her plan for leading a band of high-born ladies to the vast hospital of Paris, whose patients were of every age, social condition, nationality, and religion, but whose attendants were inadequate in number and insufficient in zeal. With his usual flair for epigram, Vincent de Paul remarked that he did not choose to put his sickle into another's harvest. The influential Madame Goussault appealed to the archbishop of Paris, who instructed her to inform the hesitating priest that her project was approved.

Vincent de Paul smiled in satisfaction, falling back on the maxim he had derived from the saintly François de Sales: never ask for anything and never refuse anything. At a meeting held in Madame Goussault's home, he told the assembled ladies their first duty was "to visit the poor patients of the Hôtel-Dieu, so sorely abandoned and so little helped in the midst of their sufferings, wounds and ailments of every kind." This appears as an undeserved slap at the hard-working nurses of the Hôtel-Dieu, administered by the gentle hand of Vincent de Paul; but at this period the Augustinian nuns may have grown careless, while Madame Goussault and her ladies, new in charity, were exploding with the enthusiasm of recent converts. Vincent de Paul drew up a brief set of rules for them, thereby becoming the founder of the Ladies of Charity (1634).

Vincent, writing to the almoner of the hospital of le Mans, thus expressed his appreciation of the work of the Ladies of Charity: "Those who have not seen it, find it almost incredible; those who have seen it, are edified." As Vincent did not wish such noble ladies to succumb to



their labors, he instructed them to avoid the wards of contagion in the Hôtel-Dieu, and to send the willing Sisters of Charity to take the risk. In fact, the written rules specifically stated that the Sisters of Charity must perform the duties of the Ladies at certain times, these times being "when there is rumor of contagion and when the said Ladies cannot go to the said Hôtel-Dieu without danger." So the soldiers marched into the heat of the battle, and the faithful commanders remained at home until the danger was past.

The Ladies of Charity, when it was not perilous, invaded the Hôtel-Dieu with *éclat*. They were women of wealth—duchesses and princesses among them, including one who became queen of Spain—and they appeared suddenly in the wards, with white aprons over their velvet gowns. These royal women sat at the bedsides of the bewildered workers and peasants, and while they left the actual drudgery of nursing to the Augustinian Sisters, and the cooking to the Sisters of Charity, they gave jellies and other dainties to the patients. The Dames did not know the difference between scurvy and spider poisoning, but they were delighted when a dying Calvinist submitted to extreme unction, or a hitherto stubborn Turk requested baptism. As pointed out by one of the biographers of Vincent de Paul: "In the first year no less than 760 Lutherans, Calvinists, and Turks were converted to Catholicism." The greatest single discovery in the care of the sick is the realization that the patient's religion does not concern the nurse. Obviously, this discovery had not been made in the days of the early Ladies of Charity.

FOUNDLING CHILDREN. The story has often been told how Vincent de Paul, returning home from a mission of mercy, observed on the outskirts of Paris the deliberate mutilation of a newborn child. Paralyzed with horror, he paused for only a moment before rushing to the spot and snatching the infant from the monster. "Barbarian," he cried, "how you deceive me—from the distance I took you for a man!" Vincent de Paul carried the baby in his arms across Paris, remembering there was a house called La Couche, in the Rue Saint Landry, where foundlings were sheltered.

At the threshold the priest stopped in dismay, for he had wandered into the hell of infancy. He knew that children abandoned on the highways, or silently left at night on the church steps, either perished of exposure, or



were picked up by adults for purposes of evil. But La Couche did, under cover, what was done in the streets, under arches. He saw hundreds of children of various ages crowded into dark holes, in the charge of a woman and her two servants. He learned that these unwanted children died of disease, or were starved or drugged to death, or were sold into infantile slavery. The life fluid was drained from their veins, to supply baths of youthful blood for the rejuvenation of the aged. The terrible truth dawned upon Vincent; many children were brought to La Couche, but few walked out again.

Like a commander who arranges his troops for action, Vincent de Paul called the Ladies of Charity and the Sisters of Charity to visit La Couche. He knew he had won the first skirmish of the coming battle when the former reported: "The children massacred by Herod were fortunate in comparison with the orphans of Paris." It was bad enough that children in a Christian nation should perish from hunger and pestilence, but what made it worse was that most of them died without baptism. The women went into action, and as they did not have the facilities in the beginning to save all the doomed children, they drew lots for the first twelve who were rescued, baptized, and fed. They wandered through the dark streets at night, gathering the babies who had been thrown away; wagoners from the provinces frequently brought undesired infants to the *Hôspice des Enfants Trouvés et Orphélins*, established by Vincent's disciples, where his Sisters of Charity served as nurses. In opening the door to organized relief for the foundlings of Paris (1638), Vincent ushered in the dawn of a movement which later became international. Engravings, paintings, and statues in the Panthéon, hospitals, and elsewhere, show this man of benevolence with foundlings in his arms, wrapped in his cloak, and he remains the foster father of orphans and the patron saint of infant asylums.

THE FRONDE. A disgusting and bloody chapter of human history is known as The Fronde (1648-53), from the French word meaning "sling," since it opened with the throwing of stones by the outraged people of Paris. The chief instigator of The Fronde was the Italian-born, Jesuit-educated Giulio Mazarini, who, by making himself useful to Cardinal Richelieu, followed in his master's footsteps as a prince of the church and real ruler of France. Thousands of *mazarinades* were written, at which the supple-



mindful Cardinal Mazarin could afford to laugh, for while he starved Paris and brought widespread distress to the provinces, he personally amassed a fortune estimated at forty million livres. In this wholly unnecessary civil war, when the court, the church, the army, and the nobility tried to outdo each other in intrigue and violence, and whose ultimate result was the enslavement of France under the absolutism of Louis XIV, the white cornettes of the Sisters of Charity were never tarnished. To the limit of their endurance they heeded every appeal, and though some died of exhaustion, their number increased daily.

The turmoil of The Fronde was still continuing when Maria Gonzaga, queen of Poland, issued a call for the Sisters of Charity. Poland was then untraveled territory to the women of western Europe, and even the courageous Mlle le Gras trembled at the thought of sending her daughters into the unknown. But Vincent de Paul gave them his blessing, and a little band of Sisters journeyed to Poland. They escaped the man-made horrors of The Fronde, but one of the greatest calamities of nature confronted them. The bubo-plague, the Black Death of the Middle Ages, the *pestis hominis* of history, greeted them upon their arrival in Warsaw (1652). They began to work in the strange land, for the pestilence did not frighten, nor did the famine dismay, the Sisters of Charity of Vincent de Paul.

HOSPITAL OF THE NAME OF JESUS. In the last year of The Fronde, an anonymous bourgeois gave Vincent a hundred thousand pounds for charitable purposes. Vincent never had any money of his own, but at times he distributed fortunes and enough provisions to feed armies. With this latest gift at his disposal, Vincent declared: "We see every day a number of poor artisans, unable through infirmity or old age to gain a living, and thereby reduced to beggary. Always intent on the problems of livelihood, they generally neglect their salvation. By opening for them a place of refuge, it becomes possible at the same time to care for their bodies and their souls, a double charity extremely pleasing to God." Accordingly, he converted a house into the Hospital of the Name of Jesus (1653), and in separate parts installed twenty old men and twenty old women under the care of the Sisters of Charity. With characteristic sagacity, Mlle le Gras explained that these inmates should neither be idle nor put at senseless labor, but must be taught to sew and weave and



in their turn they were to teach these useful tasks to others. Vincent de Paul was himself seventy-six years of age when he brought aged victims of the storms of poverty into this harbor.

GENERAL HOSPITAL. The Paris of Vincent de Paul's day had a population of seven hundred thousand, including forty thousand beggars and vagabonds. These outcasts requested alms, often with the aid of a dagger; such was their boldness that they appeared at the steps of the altar to exhibit frightful wounds which were sham infirmities. The pulpit orator, Bossuet, described these submerged creatures as "corpses before they were dead," but they were usually too animated for the comfort of Paris. Cardinal Richelieu's niece, the Duchesse d'Aiguillon, to whom Corneille dedicated *Le Cid*, conceived the daring project of erecting a Hôpital-Général which could take in all the beggars of Paris, give them useful work to do, and in return would supply them with the gospel and food. She appealed to the elderly Vincent, realizing that her plan could succeed only if he agreed to be its head. Vincent perceived the difficulties of such an undertaking, but he could not shatter the ardor of the Ladies of Charity under Mme d'Aiguillon or becloud the shining faith of Mlle le Gras of the Sisters of Charity. When his consent became known, fortunes were contributed for the enterprise.

One day Mlle de Lamoignon obtained sixty thousand pounds in cash from Mme Bullion, and carried off the gift in her own hands, bending under the welcome burden; Cardinal Mazarin's first donation was one hundred thousand crowns; the parliament voted to tax the town for funds for the hospital; the king, after the intercession of Anne of Austria, contributed a large tract of land where saltpeter was manufactured, and La Salpêtrière endures to this day. Upon the opening of the General Hospital (1657), everyone in Paris was gratified, except those it was intended to benefit. Beggars who had been paralyzed for years, fled from the city on swift and sturdy legs; among those who remained, crutches were discarded, bandaged and amputated limbs became whole again, humped backs were straightened out, the deaf could hear and the blind could see. The journalist Loret remarked that never before in Paris had anyone seen so many people so suddenly cured.

The Duchesse d'Aiguillon and other important Ladies of Charity were outraged at such ingratitude, and unhesitatingly insisted the poor be imprisoned in the hospital, since it was for their own benefit. If the poor



did not know what was good for them, then it was legitimate on the part of their charitable superiors to employ force to show them what was right. Vincent de Paul did not approve of these tactics, but for once his Ladies of Charity, in their boundless love for the poor, had gotten out of hand. As a matter of fact, although thousands of the poor escaped confinement within the walls of the hospital, other thousands came of their own accord. At Vincent's request, his dear disciple and first biographer, Louis Abelly, was appointed master of the hospital, and the Sisters of Charity were its first nurses. In the chapel of the hospital, Bossuet, the most eloquent preacher of the time, threatened brimstone and destruction to all Protestants who refused to accept Catholicism. It becomes obvious that the General Hospital did not conform to the modern idea of a hospital, but because of the magnitude of the undertaking it was regarded as "one of the greatest creations of the century." Incidentally, l'Hôpital Général gave Vincent de Paul his chief headaches.

THE PEASANTRY OF FRANCE. A seventeenth-century Frenchman, the moralist whose essays are social photographs, offered a true picture of the peasantry of the period in his *Caractères* (1688), and the exposure by Jean de la Bruyère (1645-96) is not dimmed in the early English version:

We meet with certain wild Animals, Male and Female, spread over the country, black and tann'd with the Sun, link'd down to the Earth, which they are always digging and turning up and down with an unweary'd Resolution; they have something like an articulate Voice, and when they stand erect discover a human Face, and indeed are Men; at night they retire into their Burrows, where they live on brown Bread, Water, Roots and Herbs: They save other Men the trouble of sowing, labouring, and reaping for their Maintenance, and deserve, one would think, not to want the Bread they sow themselves.

Richelieu used to say that he liked Vincent de Paul because his good works made Protestantism unpopular and because he never interfered in politics. It was a characteristically acute observation by the cynical cardinal-statesman. Vincent was sensitive to every cry of pain, but he could meet the biggest scoundrels in France, including Richelieu himself, with a humble smile. He never questioned the social system of his day, never denounced in hot anger the corruption and degeneracy of his country's government. He saw the worker overwhelmed with taxes that were wasted by spendthrifts; he saw the toiler ground to the dust by feudal



dues and church tithes; he saw the cringing peasant, cap in hand, bringing the produce he had wrung out of the earth to idle and perfumed aristocrats. The more the people labored, the less they had, but if Vincent could instill religion in their hearts instead of rebellion, he rejoiced in the benediction of God. It is not surprising that the authorities, the privileged classes, and the malefactors of the time, contributed generously to the numerous charities of Vincent de Paul: he was soothing opium to the popular discontent.

ALMOST THE BISHOP OF POITIERS. Vincent was not a flatterer, and he did not court the favor of the powerful; he simply felt that obedience to the established order was obedience to God. In the performance of duty he feared no one, not even a duchess, a lady of such high rank that she was connected with the household of the queen. This duchess was the mother of a son of notoriously dissolute habits, who was seen night after night reeling through the streets of Paris so drunk that he did not know his name or his station in life. The duchess felt it would be good for her son's morals if he left Paris, and she induced the queen to appoint her bacchantic offspring the bishop of Poitiers. None dared to oppose this nomination except Vincent, who hastened to the Palais Royal and informed Anne of Austria that an episcopal see was not a fitting retreat for a sot. The queen, who had expected and dreaded this interview, was obliged to revoke the appointment, and she commanded Vincent to pacify the duchess. Vincent attempted to do so, but the duchess terminated his visit by throwing a stool at him, demonstrating by the sureness of her aim that she was practiced in the hurling of stools across the room. When Vincent got outside, a priest waiting in the antechamber wanted to protest to the duchess. Vincent stopped him, and, wiping the flowing blood from the wound in his forehead, said with a smile: "My brother, your business does not lie there; this is our way, let us go. Is it not wonderful to see to what lengths the affection of a mother for her son will go?"

SUMMARY AND COMMENTARY. Vincent was past forty before his missionary zeal became active, and though he accomplished so much in the following forty years, he was not in haste and did not force issues, but rather made himself the instrument of developing events. He knew so well the brevity of life, yet there was an air of eternity about him. The confra-



ternity of charity for women (1617); the confraternity of charity for men (1619), but with the wise provision that the care of the sick is to be reserved for women, "as better fitted for it than men"; the appeal for the galley slaves (1619); the nightshelters and workshops (1620); his Sisters of Charity, who were nuns without vows (1633); the Ladies of Charity (1634), who frequently diverted their wealth into channels of mercy; the saving of foundling children (1638); his distribution of food and wine, with general relief, to the distressed provinces of his country (1643-55), which caused him to be known as "the chief almoner of France"; his Hospital of the Name of Jesus (1653) for aged men and women; the General Hospital (1657) for the poor of Paris; and the Hospital of Sainte-Reine (1659), which he established in his eighty-third year, were not only significant for their time, but were legacies for posterity.

In his old age, when Vincent's failing and swollen feet refused to carry him far—and he found it difficult to mount even the slowest horse in Paris, on whose back he had become a familiar figure—Mme d'Aiguillon put a little carriage at his disposal. Saints are not supposed to ride around in carriages, and Vincent sent the duchess so peremptory a refusal that she appealed to higher authority; it required the definite order of both the queen and the archbishop to make Vincent use that carriage. "See, my Fathers," said Vincent to the Oratorians, self-mockingly, "see the son of a poor villager venturing to use a carriage." Although Vincent soon found he could use the carriage in the interests of charity, he invariably referred to the vehicle as his ignominy and reproached himself for his enforced luxury. In his declining days, when the ladies around him brought him delicacies, he would not partake of them, claiming they gave his peasant stomach indigestion. His last recorded words, to one of his priests from the retreat at St. Lazare, were in keeping with his life: "He who hath begun a good work, the same will perform it unto the end."

Amid the tumult of the seventeenth century, crowded with momentous events, Vincent de Paul emerges as one of its greatest figures. His ceaseless interest in the unfortunate, his ability to influence others to devote their lives to the poor and the sick, his cheerfulness under adversity, his pithy sayings, his humorous sallies, his practical wisdom, his modernity shown in many ways from the opening of the cells of the cloisters to the establishing of soup-kitchens for the needy, combined to enlarge the frontiers



of charity. St. Francis of Sales, the celebrated bishop of Geneva, once gazed at Vincent de Paul, and remarked that he would be "the holiest priest of his time." A saint of the church is not necessarily a saint of humanity, for some saints of the church have been brutal enemies of mankind. St. Vincent de Paul has been canonized, alike by the papacy and by posterity. He was the father of organized charity, and no other man gave so far-reaching an impulse to nursing.

Giordano Bruno was nearer the truth than his contemporaries, and thus it was his fate to be lodged for seven years in the prisons of the Inquisition, from which he was led to the stake (1600); in that year, Vincent de Paul, a Franciscan-educated shepherd boy who accepted all the beliefs of his day, was ordained a priest. One was a man of science, and Rome burnt him; the other was a man of faith, and Rome canonized him. Vincent de Paul was never a challenge to contemporary superstitions or crimes: his greatness was displayed in the organizations he established for the relief of sickness and suffering, his genius lay in his compassion for all who dwelt in the valleys of sorrow. In the work of his Sisters of Charity, he planted the seed of the undying tree of Revelation (22:2): "In the midst of the street of it, and on either side of the river, was there the tree of life, which bare twelve manner of fruits, and yielded her fruit every month: and the leaves of the tree were for the healing of the nations."

With moving words, warmed by the sunlight of his smile, Vincent kept before the Sisters of Charity their goal as they underwent their training: nursing in hospitals and in the homes of the poor, and education of the little children of the poor. Ever faithful, still feeling his presence after an elapse of more than three centuries, the Sisters of Charity have never deviated from that ideal. Where are the Sisters of Charity? They are in the orphanages of young life and in the last ports of the aged; they are found in prisons and penitentiaries; in schools for the deaf and dumb and blind, and in asylums for the insane; they are nurses in the hospitals of many lands; look for them everywhere amid the afflicted and the destitute. As the Sisters of Charity comfort those who weep and assuage the wounds of pain, Vincent de Paul lives again.



## VI

### Nursing in the Eighteenth Century



#### GOLDEN AGE OF THE WET NURSE

ANTIQUITY OF THE WET NURSE. Man's discovery that he could buy the body of woman created the world's oldest profession: woman's discovery that she could buy the milk of woman created the wet nurse. If the newborn are included in society, then it can be stated that the second of these discoveries constituted the greater menace to society. The wet nurses of antiquity were slave nurses who had no choice, and the hired women of later times were impelled by poverty to give to strange children the breasts they denied their own offspring. Although physicians and philosophers upheld the ancient thesis that the suckling imbibes its characteristics with its milk, the wet nurse continued to multiply: she was a convenience, not to the baby, but to its parents. The most eloquent of appeals for maternal nursing appeared in the *Attic Nights* of Aulus Gellius (2nd cent. A.D.), but it is doubtful if the elegance of its Latinity caused the dismissal of a single wet nurse.

Many accusations were rightfully brought against these nurses, but if they had had spokesmen, they could have told how they were exploited by institutions, agents, or the families that employed them, though it was a penal offense to refuse to pay the wet nurse her wages. Of course there were nurses who infected their sucklings, but there were sucklings who infected their nurses. Early in the seventeenth century, Jacques Guillemeau (*The Nursing of Children*, 1609) called attention to infants who contracted syphilis from their nurses ("I have known nurses give little children the French pox"); in such cases he said the nurse must be sent away, and a healthy nurse obtained for the infected child; if a nurse could not be found to run the risk of the great pox, then the child should suck a



goat. It would have been better for so celebrated a physician to have suggested the goat in the first place.

WILLIAM CADOGAN. A proverb was responsible for the death of many children in the eighteenth century: "The best doctor for a child is an old woman." Thus the sick child was placed in the hands of old women and untrained nurses. The proverb was not entirely evil, however, for the physicians with their violent remedies aided in the slaughter of the innocents. Whatever the causes, the terrible infantile death rate agitated many medical pens. William Cadogan, in his *Essay on the Nursing and Management of Children* (London, 1750), wrote that if anyone doubts the results of great grandmotherly methods, let him "look over the Bills of Mortality, there he may observe that almost half the number of those that fill up that black list are under five years of age." Later it was estimated that in Cadogan's time one-third of the total mortality was of children under two years of age, and that seventy per cent of the children who came into the world passed out of it before they reached the age of five.

Cadogan, in his plea for maternal feeding, wrote the now familiar passage:

There would be no fear of offending the husband's ears with the noise of the squalling brat. The child was it nurs'd in this way would be always quiet, in good humour, ever playing laughing or sleeping. In my opinion a man of sense cannot have a prettier rattle (for rattles he must have of one kind or another) than such a young child. I am quite at a loss to account for the general practice of sending infants out of doors to be suckled or dry-nursed by another woman, who had not so much understanding, nor can have so much affection for it as the parents: and how it comes to pass that people of good sense and easy circumstances will not give themselves the pains to watch over the health and welfare of their children: but are so careless as to give them up to the common methods, without considering how near it is to an equal chance that they are destroyed by them. The ancient custom of exposing them to wild beasts or drowning them would certainly be a much quicker and more humane way of despatching them.

William Cadogan (1711-97), physician to the Foundling Hospital (chartered 1739), was vigorous in protest against the unnatural but fashionable practice among the upper classes of separating mother and child. He was an apostle of breast-feeding ("both breasts at each time"), provided the breasts belonged to the mother and not the nurse: "No other Woman's milk can be so good for her Child; and dry-nursing I look upon to be the



most unnatural and dangerous Method of all; and according to my Observations not one in three survives it." In the mid-eighteenth century there were various London parishes in which the infants under one year of age who were put out to nurse had a mortality of ninety-nine per cent, which was almost a perfect record from the standpoint of death.

HUGH SMITH. The champions of maternal feeding splashed the acid of scorn upon the mothers who refused to suckle their young, but Hugh Smith (*Letters to Married Women on Nursing*, 1772) attempted to entice them with honey:

Oh! that I could prevail upon my fair countrywomen to become still more lovely in the sight of men! Believe it not when it is insinuated that your bosoms are less charming for having a dear little cherub at your breast. I speak from the feelings of a man, and of one too who has an universal and generous love for the virtuous part of your sex. Trust me there is no husband could withstand the fond solicitations of an endearing wife would she be in earnest in her desire of bringing up her own children. Rest assured when he beholds the object of his soul cherishing and supporting in her arms the propitious reward of wedlock, and fondly traces his own lineaments in the darling boy, it recalls a thousand delicate sensations to a generous mind.

Despite the various editions and translations through which the *Letters* passed, they are too sweet for the modern taste which prefers the style of Hugh Smith's contemporary, John Cooke of Essex: "Of a hangman and a hard-hearted nurse I know not which is the cruelest."

MADAME MERCIER. The fees and rewards of the wet nurse depended upon the social status of the baby she suckled. Madame Mercier was the wife of a village horse-trader, but she fulfilled all the requirements (among them being "a brunette with good teeth") of a royal nurse, and she had the honor of giving her breasts to the Duke of Brittany and to Louis XV. In gratitude, her husband was appointed controller-general of the queen's household, her five sons rose high in the service of the state, her three daughters married aristocrats, Madame Mercier herself became the first waiting-woman of the queen, and was ennobled with grant-of-arms indicating her profession. Her career demonstrated what good milk, deposited in the right place, could do for a woman and her family.

THE NURSING BOTTLE. The pediatric literature of the eighteenth century was an ever swelling crescendo of accusation of mothers who would not



give their children the breast, and yet this was the Golden Age of the Wet Nurse. Jean-Jacques Rousseau's widely read protest against wet-nursing as a source of national weakness (*Emile*, 1762), did not diminish the extent or the evil of the institution. The mania reached such proportions that the poorest families employed wet nurses as poor as themselves. Harlots who found themselves pregnant, adopted the profession of wet nurse during the lactation period; and unmarried girls gave birth to illegitimate offspring (who disappeared in baby-farms) for the purpose of qualifying as wet nurse. The decline of the wet nurse was due neither to the preachments of the physicians nor the fulminations of the philosophers; it was due to the advocacy of boiled cow's milk (1784) by the last man-midwife who was really the foremost pediatricist of the century, Michael Underwood, and to the increasing popularity of the wet nurse's principal rival, the nursing bottle.

### OPIATES FOR INFANTS

PROPRIETARY MEDICINES. In the eighteenth century, secret remedies for the restoration of health, the increase of sexual potency, and the prolongation of life, for the first time attained the status of big business. An ointment, a powder, or a coated pill, of mysterious composition, backed up by a pamphlet with credulous or fictitious testimonials, made fortunes for the quack; if he could harangue a crowd or impose upon the fashionable world, both of which were easy, it meant a gilded carriage and a palace on the hill. Stoughton's Great Cordial Elixir, Betton's British Oils, Cagliostro's Balm of Life (and a never-failing recipe for making homely women beautiful), Mrs. Stephens's Secret (for dissolving stone in the bladder), Brodum's Nervous Cordial, Solomon's Balm of Gilead, John Hooper's Female Pills, and Innocenza della Lena's Powder of Mars, were the ancestors of the present-day patent medicine industry. Among these proprietaries was one designed for children: Godfrey's Cordial, a mixture of oil of sassafras and opium. The dose for an infant was 5 minims, and not one teaspoonful after the other. The bottle of Godfrey's Cordial became the trademark of a baby's nurse.

GODFREY'S CORDIAL. The first name of A. Hume (*Every Woman her Own Physician*: London, 1776) is unknown, for he did not give it in his book,



and his contemporaries did not inquire. A. Hume, about whom no biographical information survives, deserves to be remembered if he had never written anything except the following passage:

Nearly all the children who die within the first year are carried off by convulsions but then these convulsions are the consequence of other disorders which justly demand the utmost attention and care of the mother and nurse who are entrusted with so precious a charge as the life and health of the little innocents. Humanity obliges the author to speak plainly upon this subject and he is sure he shall not offend the worthy and the good by declaring that these convulsions which carry off thousands of infants every year are chiefly owing to the brutality and laziness of nurses who are forever pouring *Godfrey's Cordial* down their little throats, which is a strong opiate and in the end as fatal as Arsenic. This they will pretend they do to quiet the child—*thus indeed many are forever quieted*—when the negligent parents (who put their children out to nurse because they would not be disturbed with their affecting cries) are acquainted that the little babe went off suddenly in convulsions, and all parties are perfectly satisfied. If such a conduct is not *murder* I know not what is.”

### FIRST DISPENSARY FOR CHILDREN

GEORGE ARMSTRONG. The London physician, George Armstrong, did one thing supremely well: at a house in Red Lion Square, Holborn, he opened the Dispensary for the Infant Poor (April 24, 1769). Armstrong loved his dispensary, fought for it, paid its expenses out of his own pocket, described it as the only institution in the country where children were received “without any letters of admission, provided the parents are really indigent, the case dangerous, and requiring speedy relief,” and claimed that “no charitable institution was ever established whereby so much good has been done, or so many lives saved at so small an expense.” The third edition (1777) of Armstrong’s work on the diseases of children, an excellent pediatric treatise for its time, contains a general account of his Dispensary for the Infant Poor. This edition is thus dedicated to Queen Charlotte:

It would be doing the greatest injustice to your Majesty’s humanity and benevolence, to suppose that the welfare of the Infant-race can be indifferent to your Majesty. A full assurance of the contrary has induced me to solicit the honour of your Royal patronage to the following work, of which the chief intention is to alleviate the distresses incident to children, from the various diseases to which they are exposed. This is a field that stands greatly in need of cultivation; and your Majesty’s gracious countenance to an attempt



of this kind, cannot fail to have a happy effect in inciting others to make further improvements on it.

Queen Charlotte was the mother of fifteen children by George III, but she yawned when she heard of the children of the sick poor. Queen Charlotte did not know enough to know that she would have immortalized her name if she had aided the first pediatric dispensary in her country. Armstrong was seized with a paralytic complaint, and his dispensary was closed (1781) because of lack of funds. "Died in obscurity," was the epitaph of the founder: neither the year of his birth nor the date of his death is recorded.

DISPENSARY VERSUS HOSPITAL. George Armstrong, founder of the earliest pediatric dispensary, could not visualize a pediatric hospital:

If you take away a sick child from its parent or its nurse you break its heart immediately: and if there must be a nurse to each child what kind of an hospital must there be to contain any number of them? Besides, as in this case the wards must be crowded with grown persons as well as children must not the air of the hospital be thereby much contaminated? Would not the mothers or the nurses be perpetually at variance with one another if there were such a number of them together? Would not the children almost constantly disturb each other with their crying? Supposing only a few in one ward should be taken ill of a vomiting and purging, to which infants are so very subject, would not this presently infect the air of the ward and very probably communicate the disorder to other children confined there?

Evidently some of Armstrong's friends were arguing for a children's hospital, otherwise he would not have asked such questions. The fate of the first children's dispensary delayed the opening of the first children's hospital for three generations (Charles West's Hospital for Sick Children in Great Ormond Street, 1852).

## THE NURSE IN THE LAZARETTO

THE WINDOW TAX. A nation which would refuse to manufacture an earthquake within its territory, and certainly would not import cholera to its shores, nevertheless inflicted itself with the window tax. As all homes, farmhouses, tenements, attics, cellars, workhouses and prisons were taxed according to the number of windows they contained, and as anything which admitted light and air was classified as a window, light and air ceased to be free in England. The younger Pitt, who became prime



minister in his twenty-fifth year, was not the father of the window tax, but he extended and enforced it so rigorously that the window tax may be called Pitt's tax. Pitt was regarded as the greatest of England's prime ministers, but about sanitation he knew nothing, and in collecting money for the Continental wars he intensified a national campaign against fresh air and sunlight. To escape the window tax or to reduce it to a minimum, room windows, hall windows, skylights and underground windows were obliterated ("stopped up effectively with stone or brick or plaister upon lath"). Long after Pitt's tax (1784) had been repealed (1851), old houses stood in England with bricked-up windows, in mute reproach at the assault on public health.

JOHN HOWARD. Martin Wall, physician to Radcliffe Infirmary, had the honor of drinking tea with Dr. Samuel Johnson at Oxford (1784), and was described by Boswell as "this learned, ingenious, and pleasing gentleman." Toward the end of the year, Martin Wall wrote a letter to John Howard (1726-90), printing it as a pamphlet, so a copy could be sent to the supporters of the Radcliffe Infirmary. Martin Wall's letter was a criticism of John Howard's suggestion for open windows in the Radcliffe Infirmary. Lecturer on chemistry, and soon to be professor of clinical medicine at Oxford, Martin Wall declared that some patients could not tolerate fresh air. When the Radcliffe Infirmary nailed its windows down, to prevent the entrance of moving air into the wards, the hospital acted with the approbation of the profession and the approval of the patients. John Howard wrote in his notebook (1788):

In my various journeys in England and Wales, I have seen many houses defaced on account of the odious tax on windows; and I cannot help repeating my concern for its pernicious effects. I am persuaded it has a very bad influence on the health of the lower classes of people; and this may be one reason of their not having now such healthy, ruddy complexions as they had formerly. The farmers' servants having been crowded into unventilated rooms or holes, and our labouring poor having been habituated to close habitations, they dislike, when they come into work-houses or hospitals, the admission of fresh air.

ERRORS OF PHYSICIANS. John Howard, tyrant in his home and philanthropist to the world, possessed ample means to enjoy all the good things of life: his inexorable destiny drove him through his native country and



across Europe, notebook in hand. In the first decade of his unparalleled journeys he traveled forty thousand miles in hell on earth. This man, who slept little, ate no meat and drank no liquor, passed his days in the nightmares of prisons, county gaols, bridewells, hulks, pesthouses, foundling asylums, cells of galley slaves, hospitals and infirmaries; he descended into dungeons by ladder, and took passage in a ship so foul it was quarantined. Howard had no education, but on the subject of infection the medical professors of his time were mere children in his presence. The medical faculty of Paris decided the plague was not contagious, a dictum confirmed by the eminent Maximilian Stoll of Vienna, which caused Howard to declare: "From no other cause than the error of the physicians, who constantly maintained that the disease then epidemic was not contagious, happened that terrible visitation which in 1743 ravaged the city of Messina and its vicinity, with the loss of above forty-three thousand individuals, in the short space of only three months."

PRISONS AND LAZARETTOS. John Howard, fighting for the free circulation of air in sick wards, and for ready accessibility to plenty of water in hospitals, was opposed by contemporary medical opinion. The century which discovered oxygen, was the century of foul air. By his study of the construction of prisons and hospitals, Howard realized that in the preceding century fresh air was held in higher esteem than in his own. Howard saw human beings perishing from putrid air, and knew from experience the vivifying effects of fresh air. In his travels Howard took an extraordinary number of measurements, and it has since been realized that "science is measurement." John Howard went to Warrington, for there was the workshop of an expert printer (William Eyres), and published at his own expense the volumes known by their short titles of *Prisons* (1777) and *Lazarettos* (1789). With no pretense to eighteenth-century Johnsonese, the writings of Howard were adorned only with evidence. Opener of the closed doors of ignorance and filth, his plodding reached the height of genius; scientist and statistician, the information in his tainted memorandum books placed him among the foremost pioneers of the public health movement; and ultimately his quartos moved the world.

A BED OF STRAW. In his amazing journeys in pursuit of horror, John Howard was primarily concerned with prisoners and patients, and there



are only occasional glimpses of the nurse in the lazaretto. In his description of a hospital in Ireland, not the nurse but her bed is mentioned (*Lazarettos*, p. 86):

The infirmary at Maryborough for Queen's County is an old house in which are four rooms for patients. The floor of the room below was dirt, and the walls were black and filthy. In a room called the tower, two patients, and a little dirty hay on the floor, on which they said the nurse lay. This room was very dirty, the ceiling covered with cobwebs, and in several places open to the sky. Here I saw one naked, pale object, who was under the necessity of tearing his shirt for bandages for his fractured thigh. No sheets in the house, and the blankets were very dirty. No vault: no water. The surgery was a closet about ten feet by six; the furniture consisted of ten vials, some of them without corks, of a little salve stuck on a board; some tow, and pieces of torn paper scattered on the floor.

UNDER THE STAIRS. The nurse who lay on the straw in the room with the open ceiling at least slept under the stars, but some of her sisters slept under the stairs. John Howard thus described another hospital in Ireland (*Lazarettos*, p. 93):

The County Infirmary at Castlebar is an old ruinous house, very dirty, and the windows were stopt with straw. No linen; and no blankets but such as are found by the patients. Only one room (eighteen feet and a half by fifteen and a half) for kitchen, turf-house and wash-house, and for the nurse's lodging, which is under the staircase. Diet is water-pottage and one pint of milk a day; besides one sheep's head boiled for soup for all the patients on three days of the week, and on three other days a pennyworth of bread for each patient (weight 8 oz.).

JAMES LIND. When the celebrated Lord Anson, commander-in-chief of the British navy, circumnavigated the globe (*Voyage round the World*, 1748), seventy-five per cent of his crews died of scurvy. The calamity of sailors, scurvy destroyed far more men of the sea than ever were wrecked in storms or slain in battle. It had long been known that a little lemon juice added to the sailor's diet would save him from scurvy, but governments in the eighteenth century were not interested in preventive medicine. One year after Pringle issued his observations on the diseases of armies, another Scotsman, James Lind (1716-94), published for the benefit of the navy, his classic *Treatise on the Scurvy* (1753), dedicated to Lord Anson. The treatise could not be ignored, for it attracted European attention, yet thousands of lives continued to be needlessly sacrificed: the



admiralty, with Lind's conclusive evidence in front of its eyes, waited a leisurely forty years and more, before supplying the navy (1795) with the specific that banished overnight the scourge of the sea.

HOSPITAL AT HASLAR. Soon after its establishment, Lind was appointed physician to the naval hospital at Haslar, and accomplished so much for the health of sailors that he well deserves his title of Britain's founder of naval hygiene and father of nautical medicine. Many hospitals of the period nailed their windows so they could not be opened, but James Lind informed John Howard that at Haslar he nailed the sash windows on the staircases in such a manner that they could not be closed all summer. Howard's description of the hospital at Haslar, while it does not lack his usual sagacious recommendations for improvement, is, nevertheless, a pleasant relief: "I have always found this *well-conducted* hospital remarkably clean and quiet, and the windows on all the staircases were open. The patients have white linen shirts and the hospital clothes; and the linen of the beds is white. All the nurses here, and in the hospital at Plymouth, are women, which is very proper, as they are more cleanly and tender; and they more easily pacify the patients, who are seafaring men."

HASLAR NURSES. After this rare Howardian tribute, one expects to see a better class of nurses than ordinarily found at this period, and it is disappointing to read the Regulations hung up in the wards:

Respecting the Nurses and other Servants of the Royal Hospital at Haslar. Ordered, I, That none of the nurses, or other servants in the hospital, do conceal the effects of any of the patients who may die therein; reports of such effects are to be made, immediately after the decease of the patients, to the agent, or his clerk, by the respective nurses of the wards. . . . III, That no dirt, bones, or rags, be thrown out of any window, or down the bogs, but carried to the places appointed for that purpose; nor are any cloaths of the patients, or others, to be hung out of any of the windows of the house. IV, That no foul linen, whether sheets or shirts, be kept in the cabins, or wards, but sent immediately to the matron, in order to its being carried to the wash-house; and the nurses are to obey the orders of the matron in punctually shifting the bed and body linen of the patients, *viz.* their sheets once a fortnight, their shirts once in four days, their night caps, drawers and stockings once a week, or oftener if found necessary. V, That no nurse or other person do wash in the water closets.



The Regulations appear to grow worse as they proceed:

X, That all nurses who disobey the matron's orders, get drunk, neglect their patients, quarrel or fight with any other nurses, or quarrel with the men, or do not prudently and cautiously reveal, to the superior officers of the house, all irregularities committed by the patients in their wards (such as drinking, smoking tobacco in the wards, quarrelling, destroying the medicines, or stores, feigning complaints and neglecting their cure) be immediately discharged the service of the house, and a note made against their names, on the books of the hospital, that they may never more be employed.

According to Regulation XVII, a nurse was not permitted to accept a will drawn in her favor by a dying patient. Evidently, nurses were not ladies in the eighteenth century, even in the Royal Hospital at Haslar near Gosport, unless it be permitted to hope that the nurses were better than the Regulations by which they were governed.

### PIONEERS OF PSYCHIATRIC NURSING

PHILIPPE PINEL. If the child of a village doctor in the department of Tarn, France, had been born in the family home, his birthplace would have been Saint-Paul, but as his mother was temporarily absent, the event occurred in Saint-André. The child was Philippe Pinel (1745-1826), and the poverty of his father did not deter him from following in the paternal footsteps. Philippe Pinel was a man of considerable culture by the time he took his doctor's degree at Toulouse (1773), and he was thirty-three when he came to Paris, so poor that he made the journey on foot. Pinel remained poor, and it was difficult for him to obtain a professor's chair, although he was better qualified than his successful rivals. Externals were against him: he was below the medium height, he did not possess a booming voice, his speech was halting, and his manner embarrassed. Thus, on more than one occasion, candidates with less science but more self-assurance, gained the coveted prize.

BICÊTRE AND SALPÊTRIÈRE. Pinel's great opportunity came with his appointment as chief physician of the vast insane asylums of Paris, the Bicêtre and the Salpêtrière. How Pinel (1793), offering his life and liberty to the authorities if his experiment failed, struck the chains of centuries from the limbs of the mentally afflicted, took them out of their dungeons into the sunlight, abolished over-drugging and excessive bloodletting, treat-



ing them with humanity instead of the brutalizing harshness of the past, and how Pinel in turn was saved from being hanged on a lamppost by one of the patients he had liberated, is one of the most dramatic episodes in the history of medicine. Robert Fleury's painting of Pinel striking the shackles from the insane is a familiar illustration in medical iconography, and serves as the frontispiece of several books.

TREATISE ON INSANITY. Pinel concludes the introduction to his treatise on insanity with the pronouncement:

A medical work published in France at the end of the eighteenth century should have a character different from that of a work produced at any other time; it should be distinguished by a certain free play of ideas, by a tempered frankness, and above all by the orderly spirit of research which rules in all parts of natural history. It should be dictated neither by individual prejudices nor by the flights of keen imagination, but by a truly sincere love of mankind, or rather by the honest desire to contribute to the general welfare.

This introduction is therefore a manifesto of the new spirit in psychiatry.

A FOOTNOTE. Amid numerous footnotes in this introduction, there is one which is usually overlooked, and yet nothing in the life of Pinel more clearly reveals the greatness and goodness of the man than this footnote. It is as follows: "A manuscript of nine pages by Monsieur Pussin which has been entrusted to me." To understand the significance of this simple footnote, we must understand the difference between the two men. Pinel had studied at Lavaour, Toulouse, Montpellier, Paris; he was scholar, author, translator of books, familiar with Greek and Latin and the modern tongues; he was physician and mathematician. And Pussin, whose little manuscript the learned Pinel handled so tenderly, did not belong to the academic world.

PUSSIN AND HIS WIFE. In his twenties, Joan-Baptiste Pussin (1746-18—?) of Sous-le-Saulmer, entered a hospital for an ailment of the flesh (*humeurs froides*), and upon recovery asked for employment at the Bicêtre to nurse the mentally ill. Uneducated and untrained, his tact, sincerity, intelligence, and experience made themselves felt, and even before he knew Pinel he had unloosed the chains of patients on his own responsibility. Pinel



thought so highly of the character and ability of Pussin that he requested him to come to the Salpêtrière. Thus the tanner's apprentice, supervisor at Bicêtre (1785), became supervisor at Salpêtrière (1802). This was the Pussin of Pinel's footnote, the devoted man whose profound knowledge of mental patients caused Pinel to say: "I abandoned the dogmatic tone of the physician." Pussin brought to Pinel not only his own nursing skill, but that of his wife. Pinel wrote of Madame Pussin: "I marvelled at her approach to the most disturbed patients, to see her calm them by sympathetic handling, and to make them accept nourishment which they had refused with violence from everyone else." René Semelaignes, historian of psychiatry, expressed the opinion of posterity when he said that the name of Pussin must live with that of Pinel.

### FORERUNNERS OF THE RED CROSS

WAR OF THE AUSTRIAN SUCCESSION. Maria Theresa mounted the throne of Austria when her father died. Various ruling houses raised objections, and the courts of a continent talked in circles. While Europe argued, Prussia acted. Frederick the Great began the War of the Austrian Succession (1740-48) by invading Silesia without a declaration of war, a characteristic Prussian gesture. Prussia was then a minor power with a small army (100,000 men), but an army with three overwhelming advantages: it was always mobilized; it struck without warning; and it had Frederick the Great. As the war dragged on, nearly every country in Europe was involved; naval battles complicated the confused scene, and the conflict spread to North America and India. The greater the chaos, the more did Prussia profit. England left her allies in the lurch at a critical juncture to quell a rebellion at home, and there were mutterings of "perfidious Albion." An immense number of Russians finally marched from Moscow to the Rhine, but in those days Russians were usually late. No war can be pleasant, but the War of the Austrian Succession is one of the most disgusting on record: it ended in the triumph of the aggressor, Frederick the Great. For the rest of her life, Maria Theresa tried to loosen the Prussian grip on the lost province of Silesia, but the conquering hand never opened. Frederick the Great, older than Maria Theresa, outsmarted her, outfought her, and outlived her.



TREATY FOR THE SICK. Out of this war there nevertheless emerged a surprise, for representatives of the belligerents signed an amazing document at Frankfort (July 28, 1742), containing these articles:

*Article 37:* That physicians, apothecaries, directors, and other officers serving in the hospitals or armies shall not be liable to be made prisoners of war, but shall be sent back as soon as possible.

*Article 41:* That care shall be taken of the wounded of both sides. That it shall be allowed to send them surgeons and their servants, with passports from the generals; that all those who have been taken prisoners, and those who are not so, shall be sent back under the protection and safe guard of the generals, with liberty to be transported by land or water, as the greater convenience of places shall permit; however, upon condition, that those who have been made prisoners shall not serve until they have been exchanged.

*Article 42:* That the sick on both sides shall not be made prisoners; that they may remain in safety in their hospitals, where each of the belligerent and auxiliary parties shall be free to leave them a guard, which shall be sent back, the same as the sick, under the passports of the generals, by the shortest way, and without being liable to be molested or stopped. So also shall commissaries, or muster masters, chaplains, physicians, apothecaries, infirmarians, waiters or other persons proper to attend upon the sick; who shall not be liable to be made prisoners, and shall be sent back in the same manner.

JOHN PRINGLE. In less than a year, these humane arrangements were enforced after the battle near the Bavarian village of Dettingen (June 27, 1743). It would be interesting to know to what extent the concept of the neutrality of army hospitals and the medical corps was due to the presence in these campaigns of the father of military sanitation, Sir John Pringle. In the preface of his *Observations on the Diseases of the Army* (London, 1752), the physician credits the design to his patron, though it has all the characteristics of a Pringle idea. Pringle did not refer to the subject in the body of his text, but offered it as a suggestion for the future. Attracting little attention at the time, and soon neglected and forgotten, the plan is now regarded as the prototype of the Geneva Convention. The passage in Pringle's Preface therefore assumes historic significance:

Among the chief causes of sickness and mortality in an army, the reader will little expect that I should rank (what are intended for its health and preservation) the hospitals themselves, and that on account of the bad air, and other inconveniencies attending them. However, during the former war, one considerable step was made towards their improvement. Till then it had been usual, for the security of the sick (when the enemy was near) to remove them a great way from the camp, whereby many were actually lost before they came under the care of physicians; or, which was attended with equally



bad consequences, if the hospitals were nigh, they were, for the same reason, frequently shifted, according to the motions of the army.

Pringle then introduces enemies in collaboration:

But the earl of Stair, my illustrious patron, being sensible of this hardship, when the army was encamped, at Aschaffenburg, proposed to the duke de Noailles (of whose humanity he was well assured) that the hospitals on both sides should be considered as sanctuaries for the sick, and mutually protected. This was readily agreed to by the French general, who took the first opportunity to show a particular regard to his engagement. For when our hospital was at Feckenheim, a village upon the Maine, at a distance from the camp, the duke de Noailles having occasion to send a detachment to another village upon the opposite bank, and apprehending that this might alarm our sick, he sent to acquaint them, that as he knew the British hospital was there, he had given express orders to his troops not to disturb them. This agreement was strictly observed on both sides during that campaign, and though it has been since neglected, yet it is still to be hoped, that on future occasions the contending parties will make it a precedent.

LETHARGIC SLEEP OF OFFICIALDOM. A French surgeon-major resigned from army service in such anger that he swore he would strangle his children if they decided to adopt his profession: despite the parental threat, his son, Pierre-François Percy, became a military surgeon and did not resign. By candlelight, Percy jotted down in his battlefield diary: "What management! To see the indifference, the lethargic sleep of all the people at the head of affairs! When one speaks to them of hospitals it might be believed that a sick or wounded man ceases to be a man when he can no longer be a soldier." The feelings of Percy were constantly outraged, for his heart was in the hospitals, and it was his fate after battles to see men lying where they had fallen, without covering, food, medicine, or attendance. Percy requested definite rank for the medical staff, but he was ahead of his age. Percy never ceased to be a man of science, and wrote the superb line: "Men of science have no need of ancestors; they belong to the universe."

PIERRE-FRANÇOIS PERCY. An army surgeon in the Napoleonic era, Percy journeyed for months at a time through mud and snow and sand, defying extremes of weather; bore, on his shoulders, a wounded officer across a bridge over the Rhine in the face of blazing guns; repeatedly exposed himself to enemy fire, being three times wounded; knew battles in whose aftermath the medical staff found itself without dressings and instruments; snatched a bite of food in the milieu of amputated limbs and ex-



piring men; slept amidst putrefying corpses and heaps of dung. This was the overworked Percy who was sharply rebuked by the Minister of War, sumptuously ensconced in Paris, because he did not send him regular reports. Percy published the censure of the Minister of War, together with his tart reply. Percy often wished he could drag these officials of war away from their comfortable desks to the actual scenes of war.

LITTER-BEARERS. Percy explained why he established squads of litter-bearers (*brancardiers militaires*):

With the desires springing up continually from the disgusting assemblage of famished and vagabond nurses; disheartened by the neglect of my request; expressly grieved at seeing so great a number of soldiers die upon the fields of battle, whose lives might have been saved and whose limbs might have been preserved by the aid of some convenient and well-organized method of transportation; and seeing also that it was necessary to have, as near as possible to the lines of battle, men expressly designated for the relief of the wounded, rather than leave this care to the soldiers (who too often seized such an opportunity to desert the ranks), I took it upon me to organize a regular corps of soldier nurses to whom I gave the name of corps of stretcher-bearers. I chose one hundred soldiers from among the most courageous, strongest and most skilful. I had them uniformed, and as soon as they were completely equipped I put them to work. Very soon the condition of the sick and wounded, before so neglected and abandoned, was entirely changed.

WOMEN NURSES FOR WOUNDED MEN. Percy reached the position of surgeon-in-chief of the Grand Armée. He was a favorite of Napoleon who made him a baron, and left him a generous legacy. Percy was noted for the variety of his operations, the number of instruments he invented, the ingenuity of his researches, and the quality of his books, including his classic *Manuel du chirurgien d'armée* (Paris, 1792). One reason why he did not have time to send regular reports to the Minister of War is because he sent so many memoirs to the Academy of Sciences. No doubt Percy's most remarkable accomplishment was his persuasion of two leading warriors who were arrayed against each other—General Moreau of France and General Kray von Krajowa of Austria—to sanction his plan of the inviolability of field hospitals (1800). Pierre-François Percy (1754-1825) was an eloquent advocate of women as nurses for the wounded and the sick, and in the Dark Age of Nursing he put on record the desired qualifications of the female nurse. It was a bequest to posterity: on the centennial of his birth (1854), his ideas first came to fruition in the Barrack Hospital of Scutari.



## VII

### Florence Nightingale



#### BEFORE THE CRIMEAN WAR

A soft drizzle fell on the darkened steam-packet *Monarch*. The passengers were sleeping, and the mate sat in silence. He turned his head at the sound of a quick step on the deck. A young girl, too excited for sleep, came out of the shadows. In the midnight rain, she watched the moving waters below, dreaming the dreams of seventeen. A member of the upper classes, she never would have spoken to a stranger on shore, but ship camaraderie is different. The young woman and the mate talked together, and he told her of his adventures on the night when the *Amphitrite* went down. This was a cursed ship, sailing for New South Wales with a cargo of 103 female convicts and 12 children. It had been wrecked on the sands near Boulogne, and the captain and the surgeon had refused to permit the women and the children to be put ashore in boats, as they feared to liberate the prisoners in their charge. Then the doomed ship broke up, and all on board were drowned except three members of the crew. The account of the disaster could be read in official language in the *Annual Register* (1833), but it became more real when heard from the lips of one of the participants.

The convict ship was far removed from the world of the listening girl. She knew only the best society, for her father was rich and possessed the beautiful estates of Lea Hurst in Derbyshire and Embley Park in Hampshire. In fact, it was because the mansion at Embley was being remodeled that she was now traveling abroad with Papa, Mamma, her elder sister Parthenope, nurse Gale, and the French maid Thérèse. The family had little to do except to arrange elaborate parties, and to attend parties in return. While waiting for the house to be finished, they had



undertaken a leisurely journey (Sept. 8, 1837—Apr. 6, 1839) through France and Italy and Switzerland. They saw everything worth seeing, and met everyone worth meeting. It was a glorious trip.

The family returned to their Embley home, which in their absence had been transformed from Georgian to Elizabethan, with six new bedrooms for additional guests. The decoration of the new rooms was a problem for the lady of the house: "Fawn might light up best, very pale and cool with gold mouldings. The blue in the ceiling, if it were made as skiey as possible, might be brought to harmonize even with green of a yellowish tint." The builders had vowed by the Queen that the house would be ready on time, but it was not. This did not worry the family unduly, for it resulted in a shopping-tour of London where the lady of the house could ponder over the relative merits of Axminster and Wilton carpets, and buy "purple silk cushions with gold *fleurs-de-lys* on them." Finally they went home to enjoy themselves with charming cousins and fashionable guests.

The dominating member of the family was the handsome lady of the house, Frances Smith, who had married William Edward Shore. This man had all the good things in life, though he never worked for them. At the age of twenty-one, Shore inherited the property of his maternal uncle, Peter Nightingale of Lea, and accordingly changed his own name to Nightingale. Living in Italy with his wife, his first daughter had been born in Naples (1819), and named Parthenope, the ancient Greek name of the place. In the following year, his second daughter was born in Florence, and was likewise named after her birthplace. In the family and among their familiars, Parthenope was Parthe or Pop, and Florence was Flo. There were no other children.

Among the upper classes of England, there were numerous families like the Nightingales—charming people with much money, who had delightful friends with much money. They played and danced and gave theatricals, visited each other's estates, and traveled abroad, and returned for the autumn shooting. They attended Church, contributed funds for the conversion of the heathen, and were kind to the poor, if the poor were honest. When Flo was a little girl she had seen her father, as high sheriff of Hampshire, ride in state with twenty-four men to attend a trial. A servant named Snelgrove had stolen some beans from the farm on which he labored, and the judges, with Christian charity, sentenced

him to be transported for fourteen years. The main occupation of the upper classes, including the Nightingale family, was a succession of dinner parties at which no one was tempted to steal beans. What distinguished the Nightingale family from the other aristocratic families in the land was the unaccountable Flo.

The Nightingales, to whom the Duke of Devonshire played host, and who were "summoned to meet the Duke of Sussex," knew the Howards, Cavendishes, Ashburtons, Greys, Percys, Palmerstons, Verneys, and the Sidney Herberts. The gracious Parthe fitted perfectly into the pattern of his life, and the serenity of the family was disturbed only by the strange behavior of Flo. The younger daughter regarded her beautiful home as a prison from which she must escape, no matter how bitter the struggle, nor what pain it inflicted upon those nearest to her. She could not endure the gilded drawing-room, she could no longer suffer those eternal dinner parties. Some day, some way, she must find release from those tightening, invisible bars, and walk the road to freedom. The family could not understand what was wrong with Flo, and why she was so unhappy.

Flo became interested in a low-born Scotchman, who rarely attended dinner parties, as they aggravated the torments of his chronic indigestion. He was a writer, and after years of neglect and poverty which he bore manfully, his vehement self-assurance caused him to be overrated. He wrote in a dyspeptic style, jerky and irritable, emphasizing every sentence, using too many exclamation points and dashes, capitalizing too many words and italicizing too many phrases, employing the imperative mood entirely too much, and coining numerous expressions which were not to the advantage of his mother tongue. He had an opinion on everything, and a violent intolerance for every opinion which differed from his own. Yet he was capable of writing passages of power which stirred people profoundly. In seven weeks, in a white heat he produced *Past and Present* (1843), wherein Florence Nightingale found words which were wings to her imprisoned spirit:

Blessed is he who hath found his work; let him ask no other blessedness. He has a work, a life purpose; he has found it, and will follow it! How, as a free flowing channel, dug and torn by noble force through the sour mud-swamp of one's existence, like an ever-deepening river there, it runs and flows; draining off the sour, festering water gradually from the root of the remotest grass blade; making, instead of pestilential swamp, a green fruitful



meadow with its clear flowing stream. How blessed for the meadow itself, let the stream and its value be great or small! Labour is Life: from the inmost heart of the Worker rises his god-given Force, the sacred celestial Life-essence breathed into him by Almighty God.

To Flo, hungering for her work in the world, this man spoke with the voice of a Hebraic prophet.

Flo was religious, but at times she was suspicious of heaven, for she thought there might not be any work there. Flo was twenty-five when she made her first definite bid for work: the suggestion that she be permitted to go for a few months as a nurse at Salisbury Hospital, where a friend of her family, the venerable Richard Fowler (1765-1863), was physician. Fowler and his wife were coming to Embley, and Flo would speak to them about her plan. Mrs. Nightingale was shocked, Parthenope Nightingale was angry, and Mrs. Fowler threw cold water on the idea; Mr. Nightingale thought it was perverse (but he could be won over), and the old doctor said nothing. It was a battle between the ladies: a nice girl does not leave home—your health could never stand the work, not the way you have been bred—there are revolting diseases in a hospital with which a young lady should not be familiar, she should not even know that such diseases exist—it is not the place for you: you could not endure the disgusting life; nurses are servants with whom one does not associate; hospital surgeons are vulgar fellows who make love to young ladies—the idea is altogether unbecoming; it is utterly impossible for one of your class— Oh, Flo, why are you so odd? Flo did not become a nurse at Salisbury Hospital.

The Nightingale girls, endowed with interesting and excellent relatives, had a lovable cousin, Hilary Bonham Carter, a gentle and gifted girl whose pencil made many attractive sketches of Flo and her environment. Both of the Nightingale girls frequently wrote to Miss Carter from Embley, and these letters revealed the cleavage between the sisters:

My Love, [wrote Parthe to Hilary]

It is so beautiful in this world! so very beautiful, you really cannot fancy anything so near approaching to Eden or fairyland, or *il paradiso terrestre* as depicted in the 25th Canto, stanza 40 something; so very, very lovely that we cannot resist a very strong desire that you should come down and see it. My dear, I assure you we are worth seeing. I never, though blest with many fair visions (both in my sleeping and my waking hours), conceived anything so exquisite as to-day lying among the flowers, such smells and such sounds hovering round me! Still the garden is big, there are many clumps of rhodo-

dendrons and azaleas, and showers of rosebuds, and I cannot be all round them at once. My love . . . nightingales all round, blue sky above (*such* long shadows sleeping on the lawn), and June smells about me. Will you not come? The rhododendrons are early this year, and will be much passed in another ten days. Will you not come?

Flo also loved Hilary, but her letters to her were written in a different strain. One contained the terrible confession: "I shall never do anything, and am worse than dust and nothing. . . . Oh for some strong thing to sweep this loathsome life into the past." To the smiling Parthe, Embley was a sensuous paradise in whose comfort and beauty she luxuriated; to the embittered Flo, Embley was a house of shame whose inmates were busy only with idleness. With the passing years, the chasm of misunderstanding widened between Flo and her mother and her sister: frankly they thought the girl was mad, but hoped that travel would distract her, and marriage ultimately cure her. Both expedients were attempted.

Flo went on her travels. She visited Rome, and felt to the full the lure of the Eternal City, but even more exciting was the new Rome defended by the youths who rallied around Garibaldi. The London *Times*, speaking with the voice of respectable England, regarded Garibaldi as a vagabond in a red shirt. Heroism was not enough, and when Flo was back in England, the Roman Republic was vanquished in blood. All around her Flo heard condemnation, not of the betrayers and destroyers of the Roman Republic, but of the Garibaldians who had endangered the art treasures of Rome by fighting in the streets and on the barricades. Now, for the first time, Florence Nightingale arose to her true stature, and wrote the words which revealed that a new moral force was awake in England:

I should like to see them fight the streets inch by inch, till the last man dies at his barricade, till Saint Peter is level with the ground, till the Vatican is blown into the air and my own Saint Michael has winged his way back to whence he came. . . . If I were in Rome, I would be the first to fire the Sistine, turning my head aside, and Michael Angelo would cry Well done, as he saw his work destroyed. . . .

Flo went traveling again, this time to Egypt. That ancient land ("where the living were so dead and the dead so much alive") made a long-remembered impression upon her. She lingered in the temples of Isis and Osiris with the reverence of a worshiper of old. Sailing along the



Nile in a slow-moving dahabeah, Flo studied works on Egyptology, and with her flair for languages she learned Hebrew, to be able to read the Old Testament in the original. Contemporary Egypt also intruded itself on the visitor. There was no justice in Egypt in those days, for justice was for sale to the highest bidder. Flo saw the misery of the Arabs in Alexandria and in Cairo. She saw young girls openly sold in the slave market ("at from £2 to £9 a head"). And in the Pasha's harem she saw the loveliest woman in Egypt, helpless and hopeless.

Flo went to Greece. It was pouring when she arrived in Athens, and the rain depressed her. Later, her spirit was uplifted by the wonder of the sunset from Hymettus, and she wrote when she saw the Parthenon by moonlight: "impossible that earth or heaven could produce anything more beautiful." Yet neither the enchantment of Egypt nor the beauty of Greece could silence the cry of her heart. In her diary, at Cairo, she had written: "Oh God, thou puttest into my heart this great desire to devote myself to the sick and sorrowful. I offer it to thee." It was the same in Greece. She stood one day at the Pass of Thermopylae, looking at a rainbow in the sky. As the sun disappeared in the twilight, Flo sank to the earth and prayed: "Give me my work to do." Flo carried with her on her travels, Currer Bell's last book, *Shirley* (1849), in which Charlotte Brontë depicted the tragedy of the women who cannot find their work in the world. Wherever she went, Flo consorted with Protestant women who had dedicated themselves to the disinherited children of Mother Earth, and she became alarmingly interested in Roman Catholic nuns who devoted their lives to the sick and sorrowful. From the viewpoint of the mother and elder sister, Flo's travels were of no avail.

Lord Palmerston, one of the most influential English statesmen of his time, was wrong on many public questions, but he adored his wife and was gracious to his friends. His wife, popularly known as Lady Pam, and described as "Grace in Action," was a perfect hostess. At one of the famous Palmerstonian dinner parties, Mrs. Nightingale had the felicity of renewing her acquaintanceship with one of the social lions of the day, Richard Monckton Milnes, afterward Baron Houghton of Great Houghton (at Palmerston's suggestion). A son of Cambridge, traveler, member of parliament, founder of the Philobiblon Society, a trustee of the British Museum, Carlyle's successor as president of the London Library, a liberal interested in reform, advocate of mechanics'

institutes, biographer of Keats, pamphleteer, versifier, song writer, author, editor, and postprandial orator, Milnes was one of the most versatile gentlemen of his generation.

It was characteristic of his curiosity that he journeyed to Paris (1848), not only to observe the revolution, but "to fraternize with both sides." He made a balloon ascension for the experience, and as the representative of the Royal Geographical Society he watched the ships passing between Asia and Africa at the opening of the Suez Canal. Milnes was especially notable for his friendships, and few men were intimate with so many diverse celebrities, both at home and abroad. Within the wide circle of his sympathy were kings, churchmen, refugees, authors and authoresses, bohemians, and picturesque beggars. To genius in distress, the generous Milnes played the rôle of a British Maecenas. His breakfast parties at 26 Pall Mall, and his entertainments at 16 Upper Brook Street, were long the talk of the town.

Of course, the delightful Richard Monckton Milnes was invited by Mrs. Nightingale to dine at Embley. Milnes not only dined at Embley, he slept there; he not only slept there, but came and went like a relative. The family agreed that he was clever enough even for Flo; he was indeed the most dangerous of her suitors, for he stirred her emotions, and at times she was tempted to accept him. Milnes was profoundly in love with Flo, and marriage with him would have solved many problems. Yet in the end she sent him away, for she realized that as the wife of Richard Monckton Milnes the main function of her life would be the supervision of dinner parties. By her unalterable decision, she saved both herself and the brilliant dilettante who hovered mothlike around her: he was far happier as the husband of the Honorable Annabel Crewe than he could ever have been if joined to the woman who heard the Call.

If we wish to know what Victorian ladies really thought, we must consult their diaries: to their diaries they told everything. In her journal, Flo looked at her father:

My father is a man who has never known what struggle is. Good impulses from his childhood up, and always remaining perfectly in a natural state, acting always from impulse, and having never by circumstances been forced to look into a thing, to carry it out. But not happy. Why not? He has not enough to do; he has not enough to fill his faculties. When I see him eating his breakfast as if the destinies of a nation depended upon his getting done, carrying his plate about the room, delighting in being in a hurry, pretending



to himself week after week that he is going to Buxton or elsewhere, in order to be in legitimate haste, I say to myself, How happy that man would be with a factory under his superintendence, with the interests of two hundred or three hundred men to look after.

After explaining that her mother, by her organizing ability, obtained "the nicest society in England for us," Flo describes her sister:

Parthe, she is in her element, if she had but health and if she had but *not* me, she is in her element. It is her vocation to make holiday to hard-working men out of London, to all manner of people who come to enjoy this beautiful place. And a very good vocation it is, no one less than I wants her to do one single thing different from what she does. She wants no other religion, no other occupation, no other training than what she has. She is in unison with her age, her position, her country. She has never had a difficulty except with me. She is a child playing in God's garden and delighting in the happiness of all his works, knowing nothing of human life but the English drawing-room, nothing of struggle in her own unselfish nature, nothing of want of power in her own element.

In delivering a speech at Huddersfield, Richard Oastler illustrated it with a whip: "This is no fiction. It was hard at work in this town last week." He held up to the audience an overseer's strap which had been used on a girl, and the little slave of the factory had died. The lash was only an incident in the industrial revolution of which Michael Sadler said that our ancestors could not have supposed it possible, and posterity would refuse to believe, that a generation of Englishmen existed who would make infants, a few summers old, work in the mills sixteen hours a day. It so happened that more than one such generation of Englishmen existed, and they regarded themselves as the most righteous people on earth: they supported missions to the heathen and devoted some of the profits of child labor to charity. Florence Nightingale could not bluff her soul in this way, and she was still in her twenties when she wrote the letter which is one of the bitter classics of charity: "In London there have been the usual amount of Charity Balls, Charity Concerts, Charity Bazaars, whereby people bamboozle their consciences and shut their eyes. Nevertheless there does not seem the slightest prospect of a revolution here. Why, would be hard to say, as England is surely the country where luxury has reached its height and poverty its depth."

Flo constantly examined herself, arguing with God, and, in the agony of her frustration, frequently recur such entries:

What is my business in this world and what have I done this last fortnight? I have read the *Daughter at Home* to Papa and two chapters of Mackintosh; a volume of *Sybil* [by Benjamin Disraeli, 1845] to Mamma. Learnt seven tunes by heart. Written various letters. Ridden with Papa. Paid eight visits. Done Company! And that is all! . . . O weary days! O evenings that seem never to end! For how many long years I have watched that drawing-room clock and thought it would never reach the ten. . . . My people were like children playing on the shore of the eighteenth century. I was their hobby-horse, their plaything; and they drove me to and fro, dear souls! never weary of the play themselves, till I, who had grown to woman's estate and to the ideas of the nineteenth century, lay down exhausted, my mind closed to hope, my heart to strength.

In the spring of 1851, Elizabeth Blackwell, the Englishwoman who became America's first woman doctor, visited Florence Nightingale at Embley Park. Elizabeth—graduate of the Medical Institution of Geneva, New York; fresh from her experiences at La Maternité, Paris, where she lost the sight of one eye after syringing a child afflicted with gonorrheal ophthalmia; triumphant from her conquest of Saint Bartholomew's Hospital where all doors had opened for her except the department for female diseases—was in rare mood. She enjoyed her visit very much. "It was a perfect day," she wrote in her diary. "The laurels were in full bloom. Walked much with Florence in the delicious air, amid a luxury of sights and sounds, conversing on the future." As these two women stood on the lawn in front of the splendid drawing-room, Florence Nightingale said to Elizabeth Blackwell: "Do you know what I always think when I look at that row of windows? I think how I should turn it into a hospital ward, and just how I should place the beds!" Elizabeth Blackwell wrote it down. Florence Nightingale also kept a diary, and in its pages she wrote: "In my thirty-first year, I see nothing desirable but death."

The alarming cleavage in the Nightingale family grew more ominous with time. To appreciate the dismay of the family at Flo's hospital-hunger, the status of the hospitals of those days must be recalled. Hospitals were unhonored institutions: dreaded, dangerous, dirty. To enter a hospital was a social disgrace, for it meant that the invalid had no one to take care of him at home. The chance remark of a passing stranger may throw more light on a subject than the ponderous blue book of an official committee, heavy with statistics. For example, the following suggestion was written in the visitors' book of Radcliffe Infirmary of Oxford:



"There should be a positive order that sheets should be changed in ordinary cases at least once a month without waiting for special request." The ink dried on this free advice without producing any results, but it serves to explain the old fear of hospitals. In those days the hospital door was too often the antechamber to the morgue.

Just as there were medieval ecclesiastics who made profit out of bordellos, so in later times there were hospitals which ran breweries for revenue but did not provide water in the wards. Fresh air could not stir the melancholy corridors, for the windows were nailed down. The hospital gloried in what was called "a good old surgical stink." The surgeon was proud of his old operating-coat, which he neither washed nor changed, for the accumulating incrustations of dried blood and pus, with catgut decorating the lapel like a budding flower, attested his experience. Operators and their assistants came from autopsies or the dissecting room, and without washing their hands, examined patients and parturient women. The hospital felt like a prison, and often a term of sickness was a sentence of death.

Appalled at the frightful statistics he collected, the discoverer of chloroform anesthesia declared: "A man laid on the operating table in one of our surgical hospitals is exposed to more chances of death than the English soldier on the field of Waterloo." Septic poisoning was an ever-present horror, often supervening the slightest operation; the stench of infection filled every ward, and sloughing phagedena (hospital gangrene) was rarely absent. Pestilence followed in the footsteps of the most skillful surgeon, and since there were times when the number of coffins carried out of a hospital corresponded to the number of patients who had entered, there were hospitals which adopted the expedient of carrying out two patients in a single coffin. A suggestion was made for the abolition of the hospital system (*hospitalism*), or at least it was urged that hospitals be constructed of iron, that they might frequently be removed, rebuilt, and renovated. The plan may do credit to the generous heart of Simpson, but it indicates that his generation worked in darkness.

The nursing service only added to the hospital horrors of those times. In Lutheran lands, nursing was an occupation unfit for a decent chambermaid. In a novel by the most popular of authors, the nurse was depicted as a low, lying, filthy, drunken creature, and everyone accepted the depraved Sairey Gamp and Betsey Prig as the only types of nurses

available. Nurses were recruited from the almshouse, the asylum, and the prison. A woman denied employment as a domestic because of objectionable habits, and too old and ugly for harlotry, as a last resort, turned to public nursing. She who could not enter the establishment of a self-respecting shopkeeper, was welcomed at the infirmary.

There were institutions where all the nurses were illiterate, aged, deformed, one-eyed, or crippled. Without any training or tradition, noisy and disorderly, a servant among servants, shifting ashes under a porter's orders, getting a beggar's salary, deaf to patients who could not afford a bribe, her career was a degradation, and her solace the brandy bottle. Such is the conquering potency of custom, that neither private families nor hospital staffs expected or desired a better class of nurses. In Catholic countries, the devoted Sisters of Charity continued to carry on their beneficent tasks: in the Protestant world, the mid-seventeenth century to the mid-nineteenth century was the Dark Age of Nursing.

Under those circumstances, we can begin to realize the consternation which reigned in the Nightingale household when the well-born and highly gifted younger daughter announced her determination to become a nurse. A nurse!—why not a kitchen-wench, a handmaid, a scullion, or a slavey? The mother of Flo could see no difference between one and the other. What vision drove Florence Nightingale to this dark underworld of sickness and sorrow? It was an outcast realm of which gentlewomen of her class knew nothing. As a child, she had bandaged her torn dolls and tended injured dogs; and what little girl has not done the same? In Flo's case it was different, for in her mature years she testified that since the age of six her first thought, and the last, was nursing work. Thoughts of pleasure, parties, entertainment, courtship, marriage, were as bitter fruit in her proud mouth. Kind friends could not help her in her despair, her remarkable culture which included knowledge of ancient and modern languages did not appease her, travel throughout Europe and Egypt could not distract her. Her life at home on the magnificent family estates of Lea Hurst and Embley Park was a daily crucifixion on the cross of frustration.

Flo had lived only in those brief periods when, in opposition to her family, she studied the reports of sanitary commissions; watched surgeons operating; visited slums, ragged schools, workhouses, hospitals, and other



haunts of misery; became Fräulein Nightingale, enrolled with German peasant girls in Pastor Fliedner's recently founded Institute for Protestant Deaconesses at Kaiserswerth on the Rhine; became a novice in a convent school at Rome; and a sister among the Sisters of Saint Vincent de Paul at Paris. Deprived of nursing work, her life was without purpose. Her thirty-first year seemed to be the breaking point, but her family still hesitated. Finally, reluctantly and in bewilderment, her family had to yield. Miss Nightingale was past her thirty-third birthday before she was permitted to accept her first position: superintendent of the Establishment for Gentlewomen during Illness, Number One, Upper Harley Street, London (Aug. 1853—Oct. 1854).

An epidemic, filling the wards of the Middlesex Hospital with cases of cholera, brought Florence Nightingale to the scene, nursing the women patients by day and by night. Back at the Harley Street institution, she was fighting a worse sort of cholera which never subsides, the nastiest disease that afflicts the human race, the autointoxication of the soul, the *odium theologicum*. Flo, who did not go to church, had to hide this fact from the Committee of Ladies, but she waged a theological battle which served as a rehearsal for many more to come. The pious Committee of Ladies wished admissions to their establishment to be limited to members of the Church of England, which caused Flo to turn up her nose in her most devastating manner. Flo explained the situation to her "Clarkey dear" (Miss Mary Clarke), the celebrated conversationalist and salonist of Paris:

My Committee refused to take in Catholic patients—whereupon I wished them good-morning, unless I might take in Jews and their Rabbis to attend them. So now it is settled, and in print, that we are to take in all denominations whatever, and allow them to be visited by their respective priests and muftis, provided I will receive (in any case whatsoever that is not of the Church of England) the obnoxious animal at the door, take him upstairs myself, remain while he is conferring with his patient, make myself responsible that he does not speak to, or look at, any one else, and bring him downstairs again in a noose, and out into the street. And to this I have agreed! And this is in print! Amen. From Committees, charity, and Schism—from the Church of England and all other deadly sin—from philanthropy and all the deceits of the Devil, good Lord, deliver us. In great haste, ever yours overflowing. It will do me so much good to see a good man again.

The only unfair reference in this letter is to Lucifer, for whatever may be his sins, there is no evidence he was ever involved in sectarianism.

The doctrine of exclusive salvation, the I-will-be-saved-but-you-will-be-damned attitude, is distinctively a human crime.

Flo's work in the metropolis was a first step toward freedom; at least she was away from a home in which the maxims of society were bolts and bars. Now the King's College Hospital needed a superintendent of nurses, and both Sir William Bowman, the leading ophthalmic surgeon of London, and Louisa Twining, the reformer of workhouses where pauper nurses in black caps attended pauper patients, looked to the head of the institution on Harley Street. Again one of those tiresome family conferences: the sighing Parthe opined that Flo's health could not stand the strain, and Mrs. Nightingale acquiesced, adding that, moreover, she was afraid of the behavior of the medical students. Yet even if Flo had gone to King's College Hospital, it would have been unsatisfactory, only a temporary expedient. What she wanted was to tear apart the whole nursing system of her time, and rebuild a new system on a rational foundation. She was thirty-four, and all roads to the great adventure were blocked by the boulders of prejudice. A barbarous czar, not knowing he was a pawn in the hand of destiny, saved her: the Iron Czar began the Crimean War, and the Crimean War was the liberation of Florence Nightingale and the creation of modern nursing.

### THE CRIMEAN WAR

Nicholas-with-the-Stick, for thus was he known to his terrorized subjects, made the gallows and the knout the symbols of his country: at an opportune moment, he shed tears of distress over the mistreatment of a few Greek priests in Turkey, and henceforth proclaimed himself the protector of Orthodox Christianity. Nicholas was captivated by his reference to Turkey as "the sick man of Europe." The czar had never had time to consult history, and did not know that those who start wars do not always live to finish them. He thought he could hide his aggressive designs against Turkey by posing as the champion of the Christian victims of the sultan. His methods were too crude, and he stirred up nearly all Europe against him. Nicholas began the Crimean War, and died of frustration before it was over. In human affairs, Mars is a neutral god: the Crimean War (1853-56) introduced new weapons of destruction, but



it was also the cradle of modern nursing and the testing-ground of military sanitation.

The English and the French thought it would be a good idea to invade the Crimea, but they had no good maps of the Crimea. They searched for Jomini, the lover of war and planner of campaigns; they found the old general sitting gaily at his table at the Café Anglais, and amid the wine he presaged disaster. Disregarding the tactician's advice, England drifted into the war without preparation; and carried it on without attention to the sick and wounded. Lord Stratford de Redcliffe, the ambassador to Turkey who was hailed as the wisest of British ambassadors, never came within sight or smell of a hospital; as long as his wife could continue to give fancy balls in Constantinople for distinguished gentlemen and well-gowned ladies, the ambassador was convinced God was in his heaven and all was right with the British Empire. Vast numbers of soldiers sickened and perished because of obsolete administration, but the military and medical authorities at home and in the field knew little and did nothing.

The silence that surrounded the acceptance of Things-As-They-Are, was rudely shattered by a pen scratching from the marshes of Gallipoli and the Varna; it was heard again in "the radiant but poisonous meadows of Aladyn and Devna"; it grew louder from the Crimea, and at Scutari. The pen wrote: "The management is infamous. Do not suffer our soldiers to be killed by antiquated imbecility." In the ears of English officialdom, this charge was annoying but not alarming, for the writer was only a camp-follower, a man who had no status and wore no uniform, and had even lost his hat. Headquarters' staff, which had been pleased with this hot-headed young man from county Dublin when he coined a phrase for the British infantry ("thin red line"), now deprived him of rations. Without a ticket, and wearing a stray commissariat cap which he had picked up, while denouncing the commissariat, he appeared ridiculous. He was one of the Russells of Limerick, William Howard Russell, war correspondent of *The Times* (London), the first of war correspondents and father of the breed.

Russell wrote vividly when he was angry, and he was angry most of the time. His newspaper published lengthy despatches, dated Constantinople, from "Our Special Correspondent":

It is with feelings of surprise and anger that the public will learn that no sufficient preparations have been made for the proper care of the wounded . . . it is found that the commonest appliances of a workhouse sick-ward are wanting, and that the men must die through the medical staff of the British army having forgotten that old rags are necessary for the dressing of wounds. . . . The manner in which the sick and wounded are treated is worthy only of the savages of Dahomey. . . . The worn-out pensioners who were brought out as an ambulance corps are totally useless. . . . Here the French are greatly our superiors. Their medical arrangements are extremely good, their surgeons more numerous, and they have also the help of the Sisters of Charity, who have accompanied the expedition in incredible numbers. These devoted women are excellent nurses.

Stiff British fingers trembled as they held *The Times*, containing these despatches. They did not like the reference to the savages of Dahomey, and they liked even less the comparison with the French. The accusations of Our Special Correspondent rolled like thunder from the presses over an aroused land. Was he a man of honor, or just a wild Irishman? The people believed his exposures, and their instinct was right. The subsequent explanation of the Duke of Newcastle, that experience had shown that nurses were always drunk and utterly callous to the feelings of soldiers, no longer sufficed. Everyone asked: Have we no Sisters of Charity? Why are there no English nurses at the front? At bars, and over dinner tables, indignant voices denounced the government. Long before the Roebuck committee unseated the ministry of old Lord Aberdeen, it was overthrown by public opinion. Suddenly, the conscience of Florence Nightingale became the conscience of the British people.

Throughout the British Isles were heard innumerable echoes of the reporter's questions: "Are there no devoted women amongst us, able and willing to go forth to minister to the sick and suffering soldiers of the East in the hospitals of Scutari? Are none of the daughters of England, at this extreme hour of need, ready for such a work of mercy?" Again and again the people demanded: Why are no English nurses at the front? The question entwined itself into the soul of the Secretary-at-War, though technically it was not his affair, for the Secretary-at-War was a treasury official, and the problem belonged to the Secretary-for-War, the Duke of Newcastle. But the Secretary-at-War, stepping out of routine, picked up the burden, for he was the wealthy, elegant, and high-born Sidney Herbert (1810-61), first Lord Herbert of Lea. A younger son of the eleventh Earl of Pembroke, it was perhaps unfortunate that at the



moment when his country was at war with Russia, his mother should have been the Countess Catherine Woronzova, for this made Sidney Herbert half-Russian. In politics there might be men base enough to wonder whether the son-in-law of the former Russian ambassador at the Court of St. James's might not be a Russian spy.

Sidney Herbert married his beautiful and affectionate cousin, Elizabeth A'Court, and this attractive couple typified the best in British aristocracy. Both were sincerely devoted to public welfare, and Sidney Herbert was in advance of his age as a sanitary reformer. His extensive knowledge, his winning ways, his luminous eyes, impressed all who met him. Sidney Herbert was exceedingly handsome; but, unfortunately, he was not well: he was Apollo with Bright's disease. Amid his multifarious duties, Sidney Herbert decided to defy precedent and, for the first time in English history, send a contingent of female nurses to military hospitals. He saw various volunteers: some were Sairey Gamps, ready for change of scenery, if the pay was sufficient and the brandy abundant; some were adventuresses, seeking excitement under military auspices; some were good women without experience ("angels without hands"). He knew that devotion without training, sympathy without discipline, enthusiasm instead of organization, would carry only futility and worse to the fever-nests of Scutari.

Sidney Herbert, likewise, knew the one woman in England capable of bringing order out of that abyss of chaos, of salvaging the backwash of a bungled war. She was his personal friend, a member of his social circle. Dare he suggest that she hazard her health and risk her life in that focus of disease and death? It was England's hour of need, and Sidney Herbert had no choice. Spending the weekend at Bournemouth, he did not rest, for he wrote his remarkable letter to Florence Nightingale requesting her services (October 15, 1854). Florence had been at Belgrave Square, looking for the Sidney Herberts, but they were not at home. So she wrote the "My Dearest" letter to the wife of Sidney Herbert, offering to go out to the Crimean War as a nurse. Sunday was a day of suspense for both, for neither knew of the messages in transit. On Monday, their letters crossed in the post, and history wrote the answer.

Now that government asked it, the Nightingale family patriotically approved of Florence's mission, helped her in the selection of nurses, and basked in her reflected glory. To find a group of suitable nurses was an

impossibility, for there were not forty, nor thirty, nor twenty, in all London. Tragic, comic, and tragi-comic specimens applied, and were sent away. The Protestant Institution for Nurses in Devonshire Square refused to send a single nurse. Miss Nightingale could not afford to lose time, and she accepted thirty-eight nurses, though she realized that several were unfit: five White Nuns from Norwood, five Bermondsey nuns, six nurses from St. John's House, eight Anglican Sisters from Priscilla Sellon's Home at Devonport, and fourteen hospital nurses, including the irritable but indefatigable and invaluable Mrs. Roberts of St. Thomas's Hospital.

Sidney Herbert surmised that thirty-eight nurses on their way to Scutari were more important than an equal number of cardinals. Incidentally, Mary Clarke, who had a sharper tongue than the Secretary-at-War, looked at the hospital nurses, and remarked, "They are of no particular religion, unless the worship of Bacchus should be revived." At any rate, they were on their way to Scutari. Five days after receiving Sidney Herbert's letter, two days after receiving her official appointment from the War Office—less time than the average Victorian lady took for the selection of her bonnets—Florence Nightingale and her nurses sailed for the historic experiment in the East. She carried with her a farewell note which had come on the eve of departure from her rejected lover ("I hear you are going to the East. . . . You can undertake *that* when you could not undertake me. God bless you, dear Friend, wherever you go"). The expedition of Florence Nightingale was salve to the British conscience. Englishmen now hummed "The Nightingale's Song to the Sick Soldier," and chuckled over the cartoons in *Punch* showing lady-birds in the military wards.

In the vast Barrack Hospital of Scutari, crowded with four miles of beds, Miss Nightingale heard no laughter. Candles, sticking in empty beer-bottles, lit up endless scenes of human agony. The emanations of sewers filled the air, broken drains multiplied the confusion. There was no water, there were no pails to carry water. No soap, no towels, no combs, no brushes. Men starved to death, or perished from putrid food. They lay practically naked, or in ragged uniforms clotted with their own gore. Festering wounds were not dressed, fractured bones were not set. The floors were too rotted to be scrubbed, every crevice of the walls was alive with vermin which dropped on the living and the dead. Outside, the decomposing dogs were not removed; inside, the helpless soldiers



were attacked by rats. Here was the evidence of the breakdown of the commissariat and the collapse of the medical department.

On the heels of the Nightingale nurses, a messenger arrived in Constantinople. He was the alert John Macdonald, commissioner of *The Times*, and he carried a substantial money-bag collected by that newspaper for the soldiers. Macdonald presented his credentials to the ambassador, and asked how to dispose of the fund to the best advantage of the sick and wounded. Lord Stratford de Redcliffe answered: "Build an English Church at Pera." Such was the highest official attitude at a time when there was neither lint nor bandage, neither drug nor basin, for the maimed and mutilated. The ambassador and his wife, and their friends, dined on choice viands, while, across the way from their palace, British soldiers hungered for bread. The ambassadorial entourage slept in feathered down, and the men who fought for England had no blankets. The survivors of the Alma and Balaclava and Inkerman wore filthy rags, but the ambassador was faultlessly arrayed. In exquisite verse, Tennyson called Lord Stratford de Redcliffe "the voice of England in the East." The voice asked for an English church at Pera when there were no scissors in the hospital to cut off the lice-filled beards of the men.

On the first day of her arrival at Scutari, Miss Nightingale decoded the official secret: Anything-for-a-quiet-life. Now, the desire for a quiet life, like the longing for peace, is a laudable one, but in the midst of war it should not be indulged in to the extent of sacrificing the health and lives of soldiers. Lord Stratford de Redcliffe was perfectly willing to write a grandiloquent compliment to Miss Nightingale, if only she would remember not to disturb his diplomacy, and above all not to bother him about proper ventilation and light in the wards. Sir Andrew Smith, who was appointed medical director of the army by the Duke of Wellington himself, would admit that female nurses were tolerable if their superintendent would stop quoting statistics. Sir John Hall, who had served forty years in every climate of the globe, and without solicitation of his own was pulled out of India to become principal medical officer in the Crimea, did not complain because his pay was cut down, but he was indignant because Miss Nightingale quizzed him on the causes of preventable mortality.

When Miss Nightingale asked the purveyor for flannel shirts, socks, and drawers, for plates, tin drinking-cups and earthenware urine pots,

he replied that there were none to be had. When she asked if he expected any of these things from England, he answered, "No." "Are you taking means to get any from Stamboul?" He answered, "No." "Are they to be had at Stamboul?" He answered, "If they are, I don't know how to get them." Miss Nightingale obtained all these articles at Stamboul. The purveyor-general was very weary: everything had been all right until that woman came around, asking those troublesome questions. Later, twenty-four carpenters arrived in Scutari. The purveyor-general announced they were not needed and could have no rations. Not to be able to use a gang of carpenters in wartime, is not only indifference and incompetence: it is a definite symptom of idiocy. Miss Nightingale pounced on the carpenters, offered to feed them, and worked them until they realized that men could sweat in a Scutari winter. Miss Nightingale's carpenters made the Barrack Hospital a presentable institution.

England's picnic-like conduct of the war was a masterpiece of muddledom. Vast quantities of material from home, consigned to the soldiers at Scutari, rotted in the seaport of Varna; other quantities lay buried beneath munitions, making useless voyages back and forth across the Black Sea until discovered by accident; when shipments did arrive, the purveyor kept them safely until they were inspected by a leisurely Board of Survey. The medical officers at Balaclava implored Miss Nightingale for shirts for sick and shivering men in February (1855); over twenty-five thousand shirts which she had requisitioned, were in packing-cases in the purveyor's warehouse, but that official would not permit them to be opened until all his papers were in order. Three dragging weeks went by before the shirts were released. There were times when the purveyor's stores were filled with warm clothing which was kept from naked men because the rules had not been complied with, or a signature was missing. It is not surprising if the legend arose in Scutari, and found its way to England, that when a large government consignment awaited official unsealing which was not forthcoming, Miss Nightingale seized an ax and broke open the cases, while the purveyor (Anything-for-a-quiet-life) wept at her violation of the Regulations of the Service.

The Homeric phrase, "raging insatiably," which the Master of Balliol applied to Florence Nightingale, fitted her as closely as her white cap. She raged insatiably at the sloth, greed, indifference, stupidity, and cruelty which surrounded her. She raged at "old smoke-dried," as she



called Sir Andrew Smith, because he sat in his London headquarters, dreaming of the Duke of Wellington, and insisting that nothing was needed at Scutari, when everything was lacking. She raged at Sir John Hall, another Waterloo worshiper, the trail of whose antiquarianism could be traced from the hospital to the cemetery. She raged at Lord Cardigan, the hero who led the charge of the Light Brigade, but lived in luxury while his men hungered, and permitted the cavalry horses that galloped up the hill at Balaclava to perish of starvation (Florence Nightingale loved horses). She raged at the pious inquirers who wanted to know the very important question whether she was High Church or Low Church, and she raged at the parsons who sent her theological tracts ("I said I distributed them; whether to the fire or not, I did not say"). She raged at the army doctors because they were afraid to open their mouths, and she said they had the virtues and the vices of slaves. She raged at those nurses she had to send home from Scutari, because they were drunk in the wards, committed immoral acts with the orderlies, and stole articles intended for the patients.

Frostbite and gangrene and cholera and typhus were not the worst foes of Florence Nightingale at Scutari. Entangling red tape, stretching from a London office to the Asiatic shore of the Bosphorus, was the enemy which threatened and impeded her progress. To the men in the hospitals she was the ministering angel of the legend. Her presence in the operating-room calmed the frightened sufferer beneath the surgeon's steel. The pale face that hovered over a sick cot was full of pity, the white hand placed on a fevered brow was very gentle. But to diplomatic, military, and medical authorities who thwarted her, she seemed the personification of the Three Furies in black merino. Only because she was capable of terrible wrath, only by the power of her unbreakable resolution, was she able to drain the morass of the Crimea. Florence Nightingale, "raging insatiably," created modern nursing.

The Crimean correspondence of Miss Nightingale did not lack the feminine touch, but it was tart, harsh, mordant, for it so happened that the "Angel of the Crimea" was a satirist who could stab an antagonist with the point of the pen. To keep the picture in proper focus, however, it must be remembered that Miss Nightingale had powerful friends as well as enemies. The Sidney Herberts spread the protecting wings of patience over her, calming with their sympathetic understanding her violent tem-

pests. The Earl of Shaftesbury (the social reformer who had notified his Christian countrymen that English children, four or five years of age, were routed from bed before dawn to toil in the mines and dismal collieries for eighteen hours a day, fastened by chains to trucks which they dragged on all-fours like animals) established the Sanitary Commission which saved Miss Nightingale's mission from disaster.

The head of this Sanitary Commission (1855) was the Scottish physician, John Sutherland (1808-91). Impulsive, and so unmethodical from Miss Nightingale's standpoint that she called him the "Big Baby," he was enough of a sanitarian to know there was no sense in treating individual patients in the midst of unhalted epidemics. From the line of duty, he would not deviate. It was he who solved a mystery that had long worried Miss Nightingale: he found that the Barrack Hospital was built over an immense and cleverly concealed Turkish sewer which had no outward ventilation, but which, periodically, permitted a privy-tainted and sewer-gassed wind to fill the farthest corners of the hospital. Sutherland demanded ventilation, spades, cleansing agents, and limewash. His temper was boiling, and had he been balked, he was capable of shoving aside Lord and Lady Stratford de Redcliffe, and of smashing unopenable windows with his cane. He was just the sort of proficient, hard-working enthusiast Miss Nightingale needed. John Sutherland may not have known it in Scutari, but he was attaching himself to the skirts of immortality.

Then there were Sir John McNeill (1795-1883) and Sir Alexander Murray Tulloch (1803-64) who were sent out to investigate the trouble with the commissariat. It was a mistake on the part of the government, for these two commissioners did far more investigating than the authorities had anticipated: in inexorable official language their final Report (1856), as laid before Parliament, confirmed the despatches of Russell and the letters of Miss Nightingale. So many high reputations were punctured by the Report, and so great was the public outcry, that the government in alarm appointed the Chelsea Board which did its expected duty: it whitewashed the offenders and condemned the commissioners. But the truth had been told, and it was of service in Miss Nightingale's campaign.

The story of Miss Nightingale in the Crimea would be incomplete without reference to that picturesque and public-spirited cook, Alexis



Soyer (1809-58). Author of *The Modern Housewife* (1849), inventor of the magic stove and the cooking wagon, he relinquished lucrative service for the aristocracy to cook for the army without pay. His war-book, *Soyer's Culinary Campaign* (1857) contains hospital diets, advertisements of his new inventions (the "Scutari Teapot," and the "Sultana's Sauce"), and graphic descriptions of the work of his idol, the Lady-in-Chief. Miss Nightingale made constant use of Soyer's talents in devising extra-diet kitchens, and troops who had long been fed on slops were amazed to find themselves partaking of nutritious delicacies from the skilled hands of the chef who had cooked Her Majesty's coronation breakfast and the famous dinner for Ibrahim Pasha. The soldiers cheered lustily when Soyer appeared, and at least one General remarked before leaving his kitchen: "Monsieur Soyer, Miss Nightingale's name and your own will be forever associated in the archives of this memorable war."

Prior to the advent of Miss Nightingale, a soldier in Scutari could not get a bowl of hot soup, and had forgotten the existence of a clean shirt. In addition to supplying medical needs, Miss Nightingale opened kitchens and laundries, and organized classes and reading-huts. She overworked her nurses, though none so much as herself. In the evening, after the others had retired, she made her solitary rounds, for in the evening no other woman was allowed in the wards. She was on her feet twenty hours a day, yet walked softly through the far-reaching beds. She carried a lamp. Soldiers raised their heads to catch a glimpse of her, and blessed her shadow as it passed. Light penetrated that charnel-house, pollution was replaced by sanitation. In this abandoned pesthouse, which had been but the antechamber of an Asiatic morgue, salting with English bones the vast cemetery at Scutari, hope and healing entered with the coming of the Nightingale nurses. Thousands of sick soldiers were under the care of the Lady-with-the-Lamp. From her Nurses' Tower issued the orders which changed the mortality tables of the century. The Lady-in-Chief was not only the nurse, she was the cook and clothier, the purveyor and administrator, the educator and sanitarian of the British Army.

Russia was invaded, and General January defended her. In the Crimean winter, he muttered hard in his frosted beard. On the Barrack Hospital of Scutari he drummed a steady death's tattoo. His terrible cough, lashing the Black Sea, wrecked vessels like paper boats. When he slowly re-

treated, his enemies longed for him again, for under the sun that beat down upon the Crimea was bred uncontrollable disease. Up and down mountain paths, across ravines as rough as when they fell from the hands of the First Architect, Miss Nightingale inspected the hospitals of the Crimea in all seasons. She was stricken with fever, and death came very near. She would not listen to physicians or friends who urged her to return to England. She recovered and went on with her work in the heat of summer and the snow of winter, spending days in the saddle, and riding at night in her curtained cart.

Sevastopol, long besieged and bombarded, was finally evacuated: both sides had forgotten why they were engaged in a war begun without reason and fought without purpose. England was weary of her Russian foe, and equally weary of her Turkish friend and French ally. It was time to go home and look after the ledgers. Sky-blue forget-me-nots mingled with peony and primrose at Lea Hurst; there was dignity in the tranquil trees of Embley Park. The absent daughter lingered in camp and hospital: not until the last, living British soldier had returned home would the Lady-in-Chief begin to prepare for departure. The months passed, and in the last Christmas for the invaders of the Crimea (1855), the British Embassy gave a grand ball, for that was its chief occupation. Lady Hornby, who attended, wrote to her sister:

By the side of the Ambassadors was a tall, fashionable, haughty beauty. But the next instant my eye wandered to a lady modestly standing on the other side of Lady Stratford. At first I thought she was a nun, from her black dress and close cap. She was not introduced, and yet Edmund and I looked at each other at the same moment to whisper *Miss Nightingale*. Yes, it was Florence Nightingale, greatest of all now in fame and honour among women. I assure you that I was glad not to be obliged to speak just then, for I felt quite dumb as I looked at her wasted figure and the short brown hair combed over her forehead like a child's, cut so when her life was despaired of from a fever but a short time ago. To hide the close white cap a little, she had tied a white crape handkerchief over the back of it, only allowing the border of lace to be seen; and this gave the nun-like appearance which first struck me on her entering the room; otherwise Miss Nightingale is by no means striking in appearance. . . . She was still very weak, and could not join in the games, but she sat on a sofa, and looked on, laughing until the tears came into her eyes.

The war drifted into the peace that was signed at Paris (March 30, 1856). Florence Nightingale stood, as she wrote to Sidney Herbert, on the



Heights of Balaclava, and saw the British ships in the harbor, so gaily dressed with flags, while they fired salutes in honor of peace. It was a beautiful sight, but in the heart of Florence Nightingale there was no peace. She knew that the cessation of the war meant that the Lord Stratford de Redcliffes would again be sent as ambassadors over the earth, and the Sir Andrew Smiths would again be appointed director-generals of the army medical department ("We are in for all of them now and no hope of reform"). The news reached her that Sir John Hall, principal medical officer in the Crimea, had been rewarded for his incapacity by being appointed K.C.B. The proud initials had hitherto meant Knight Commander of the Bath, but Florence said that henceforth they would signify "Knight of the Crimean Burial-grounds." Victory had come with the spring: the melting snows made way for the violets; irises grew over the carcasses of horses, and the conquering grass covered all. Everywhere there was quick forgetting of the cemetery at Scutari; but Florence Nightingale never forgot.

#### AFTER THE CRIMEAN WAR

The British government wished to convey Florence Nightingale home in a man-of-war, in preparation for the national celebration awaiting her. A silent "Miss Smith" was a passenger on a French ship, and veiled in black, arrived unrecognized on English soil: keeping a Crimean promise, early on an August morning she rang the bell of the convent of the Bermondsey nuns; she had said that when she came back to England, she would come to them first. On the evening of that day, a step was heard on the gravel path of Lea Hurst, and the lamplight of the drawing-room fell on an approaching shadow. Florence Nightingale was home again, but not to be touched by the vulgar fingers of publicity. She was the talk of the nation in private and on platforms, broadsheet-singers lauded her in ballads as crude as they were earnest, fanciful portraits of her looked out of every shopwindow in every conceivable form of advertisement (profits may be combined with patriotism). Miss Nightingale herself did not appear, and in her own lifetime became a legend.

Florence Nightingale was the last sick soldier to come home from the war. The doctors said her heart was dilated, and if she did not rest she would die: there was so much work that she could not rest; and she

did not die. She suffered from the wonderful disease of neurasthenia, which made her so weak she could not walk across her room, but left her with enough strength to deliver titanic blows for sanitary hospitals for the people, better barracks for the soldiers, and hygienic living for the colonies. From the seclusion of 10 South Street, her hand was felt around the world. So numerous and varied were her enterprises, carried on largely through a staggering correspondence of thousands of letters a year, that a personal interview with Florence Nightingale was an event. Intimate relatives lived in her home for extended periods, communicating with her daily by notes, but seldom gaining a glimpse of the invalid who shook official complacency; her father and mother could call only at rare intervals and by special appointment; ambassadors and princes had to wait their turn, while precedence was given to a young nurse or a health worker who had something to say. It began to be rumored that it was easier to see the Queen of England than the Queen of Nurses. Prostrate on a sofa, she was Joan of Arc in a shawl, and her sword was a pen that stirred her world to a sanitary revolution.

In Miss Nightingale's time, a woman could not hold public office. A woman could be queen, a popular and venerated queen, but a woman was not considered equal to the duties of a county clerk. When Miss Nightingale was obliged to accomplish her ends through official channels, she employed willing officials. She never spared herself, and she never spared others. Her helpers were asked how they had time to see their wives, or to do anything at all, except to serve Miss Nightingale. In her assault on British administrative torpor, in her world-reform of nursing, hospitals, and sanitation, she worked men to the breaking-point. She drove her dearest friend, Sidney Herbert, when he was sick and needed rest; goaded him on, when he was a dying man. High tasks or low tasks, whatever had to be done she made men do for the cause: she told viceroys how to improve the hygiene of India, and she put the poet, Arthur Hugh Clough, to work at wrapping parcels and carrying them to the post office. The humblest workers and men and women of royal blood were equally proud to receive instructions from Miss Nightingale. She would not have hesitated to call upon the Devil if he could have served her purposes; and she had to watch herself not to impress God into her service. Indeed, on one occasion, she admonished herself as follows: "Remember, God is not my Private Secretary."



At the time of her return from the Crimea, Miss Nightingale could have received any reward within the gift of the British Empire. She was above the world's baubles, and she refused its prizes, just as she declined the rooms which the admiring queen placed at her disposal in Kensington Palace. She finally agreed to a national subscription, known as the Nightingale Fund, so she could establish a training-school for nurses. The sum of £44,000 was collected, although few guineas came from the pockets of medical men. The general absence of the medical profession from the subscription list was noted with particular gratification by John Flint South (1797-1882), one of the first fellows of the Royal College of Surgeons of England and twice its president, Hunterian orator, and surgeon to St. Thomas's Hospital. A vehement opponent of the Nightingale Fund, South published a pamphlet (*Facts Relating to Hospital Nurses*, 1857), in which he asserted: "As regards the nurses or ward-maids, these are in much the same position as housemaids, and require little teaching beyond that of poultice-making." Such was the conception of modern nursing by one of the best medical Latinists of his time, the surgical scholar who gathered the materials for *Memorials for the Craft of Surgery*. This learned man saw no need for hospital reform and had no desire for educated nurses.

In seeking a habitation for her school, Miss Nightingale thought of all the hospitals in London, and selected St. Thomas's Hospital near London Bridge: not to spite John Flint South, not because it was a medieval institution (13th cent.) with an "apostolic succession of nursing sisters," but because Mrs. Wardroper (1812-92) was there. A physician's widow in need of employment, Mrs. Wardroper had been forty-two when she became matron of St. Thomas's Hospital, and she retired at seventy-five. Mrs. Wardroper made her mark by the uprightness of her character, her unremitting devotion to her task, and her success in reforming hospital abuses. Mrs. Wardroper looked the hospital over when she was appointed matron, and found that she was the only sober woman on the staff. If she had dismissed all the inebriates at once, she would have depleted the hospital of all its nurses.

It was necessary to use the material at hand. She shortened the hours of labor, and specialized the work, realizing that some of the nurses were better fitted for cleaning the halls and scrubbing the pots than for attendance at bedsides, while others could be trusted to take care of the

sick; by improving the dietary of the nurses, she reasoned they would lose their appetite for the brandy-bottle. She appealed to educated women to cooperate with her, and to act as examples for the others: the very word "nurse" had fallen into such disrepute that Mrs. Wardroper substituted the more honorable term of "sister" for these supervisors. Without any training in hospital life, Mrs. Wardroper became a dominant figure in the hospital life of London. She did not go into society, or seek entertainment and pleasure. Shrewd and strong, but not silent—for she talked a great deal—she was Matron Wardroper, and no one who saw her could visualize her otherwise. Her sole interest was St. Thomas's Hospital. Faithfully she weeded out the unfit, replacing them by better women as nurses. Her word was law, and no rebel arose to challenge her reign. Miss Nightingale, who first saw Mrs. Wardroper when the expedition of nurses was sent to the Crimean War, conceived for her efficiency an immense admiration which never diminished.

The following is condensed from an actual report by a probationer under Mrs. Wardroper: Rise at 6:00; 6:30, breakfast and prayer; in the wards at 7:00, making the beds and washing the patients; at 8:00, prayer and washing bowls, spittoons, and other utensils in the bathroom, often in freezing weather ("I remember grieving very much at the unsightly condition of my once pretty hands"); 9:30, tea or cocoa, and bread and butter, for breakfast was insufficient; at 10:00, back to the ward, taking the orders of the house doctors; 12:45, dinner; 1:30, back to the ward; at 2:00, the honorary doctors appear in the wards—each great man is respectfully followed by students, a sister attends with the ink pot, and a trembling probationer carries a basin of water for the honorary to wash his hands after touching a patient; clinical lectures are given in Greek; at least they sound that way until the probationer becomes familiar with the alphabet of medical vocabulary; 3:30, time off; at 5:00, an hour for tea; at 6:00, in the wards, prayers and patients and doctors; 8:30, return to the Nightingale Home, and supper; at 9:00, prayers. All study in off-duty hours.

The school was on trial before the world, and Miss Nightingale prepared the "Monthly Sheet of Personal Character and Acquirements of each Nurse"; a dreaded document, whose various divisions and subdivisions were filled in by Matron Wardroper. For the probationer who transgressed, the face of Matron Wardroper was the face of doom. The



nurse who rolled her eyes, or smiled at a house surgeon, or took a walk with a medical student, was in danger of dismissal. Little Harry in the Edward Ward could not be lifted without screaming with pain; becoming attached to one of the probationers, he said. "If she lifts me, I'll try not to cry." The ward sister thereupon proved she had absorbed Mrs. Wardroper's brand of discipline: she ordered another nurse to lift the child, and she gave the probationer a black mark for spoiling the patient. The chaplain addressed them twice a week to keep their morals in repair. It was decided that nurses must not wear brilliant hose. Even Matron Wardroper could not crush woman's instinct for stockings, as the following incident will show: "One adventurous spirit found a more daring outlet. She issued forth from St. Thomas's in decorous garb, but when she gained Westminster Bridge the black dress was lifted to display, O vanity of vanities, a pair of red stockings."

The Nightingale Fund Training School in St. Thomas's Hospital was of epochal importance: it was the first Nightingale school in the world; it served as the model for other schools; it sent its graduates as leaders of nursing in foreign lands; and it raised nursing from degradation and disgrace to the rank of a respectable occupation for women. The first class was described in *St. James's Magazine* (April 1861): "The nurses wore a brown dress, and their snowy caps and aprons looked like bits of extra light as they moved cheerfully and noiselessly from bed to bed." Gone forever from English annals was the unclean reign of Sairey Gamp and Betsey Prig. Years before, a British author had asked: "Where is the woman who shall be the Clara or the Teresa of Protestant England, labouring for the certain benefit of her sex with their ardour, but without their delusion?" Florence Nightingale was the answer to that cry, and the opening of her school was the opening of a new way of life for her sex.

At this point, the importance of the school at St. Thomas's ceases. The pioneer school which had given wings to the vanguard of nursing, became a chain on the feet of the progress of nursing. Under the sway of the immovable Matron Wardroper, advance was impossible. The mind of the matron was fossilized: every new idea was alien to it. Experimental trials and changing trends in nursing could not pass the threshold of the Nightingale school: St. Thomas's was the headquarters of reaction in nursing. Florence Nightingale, propped on the pillows of her sick-

couch, corrected the examination-papers of the probationers and avidly read their diaries, written by her order (diaries should be secret and spontaneous). As the mother-chief grew older, her letters to her dear children grew sweeter. Soft, sentimental, and mystic, the aging Miss Nightingale writes ecstatic notes to the probationers: "Our Heavenly Father thanks you for what you do. Lift high the royal banner of nursing. Christ was the Author of our profession." The atmosphere of St. Thomas's is medievalized: within its corridors is heard no echo of scientific investigation.

The author Sarah Tooley, in a teasing mood, once remarked to an old probationer of St. Thomas's, that according to modern ideas, Mrs. Wardroper was not a trained nurse. Indignant eyes flashed over the tops of her spectacles as the loyal old nurse replied, "Mrs. Wardroper was a fine woman!" This was undoubtedly true, but it was equally true that the fine Mrs. Wardroper was as much an anomaly in modern nursing as Sairey Gamp herself. She tried to pour the rising tide of nursing into an outworn mold. In her eyes, between the lady-probationer and the nurse-probationer stretched an impassible gulf that could never be bridged. The costermonger's niece and the dock laborer's daughter must never forget their origin. The lady-probationer was addressed as Miss, and the nurse-probationer was not addressed at all. The inflexible Mrs. Wardroper was entirely immune to the democratic forces of the nineteenth century sweeping over England. Discipline was her creed, and class distinction her dogma. The pioneer school, with its memories and memorials of Miss Nightingale, and its plaque to Mrs. Wardroper, is the shrine of modern nursing: but it was also a boulder in the path of the progress of nursing.

Miss Nightingale would not look through Doctor Sutherland's microscope, for she did not believe in germs, and did not want to see them. Immunization, by which modern medicine gained glorious victories, not only aroused her scorn, but caused her to descend to vulgarity, as when she said: "Oh, yes, I know, they will give you smallpox or diphtheria or plague or anything you like. You pays your money, and you takes your choice." Miss Nightingale, amid her numerous benefactions, left two thousand pounds to Francis Galton, the founder of the science of eugenics, to be employed for education in statistics. The bitter sequel was as follows: "I recall or revoke the legacy of 2000 to Mr. Francis Galton



because he does not think it sufficient for the purpose I wished and proposes a small Endowment for *Research*, which I believe will only end in endowing some bacillus or microbe, and I do not wish that." Before Miss Nightingale passed away, nurses had become authors of manuals on bacteriology.

William Rathbone of Liverpool used to say: "In any matter of nursing, Miss Nightingale is my Pope, and I believe in her infallibility." It was a beautiful tribute of fealty from the founder of modern district nursing to the mother of modern nurses, but the unforgivable sin in science is the assumption of infallibility. Miss Nightingale constantly pointed out to her nurses the danger of stagnant water and stagnant air, and the danger of becoming a stagnant woman: she could not realize that the most revolutionary woman of her epoch had become a stagnant woman. The time had come, in the upward climb of the profession she created, for the self-organization and state registration of nurses. In the rapidly increasing, chaotic mass of nurses, it was necessary to differentiate the qualified and the unqualified. Doctors, schoolteachers and plumbers were not humiliated because they could not practice without a license: they regarded the license as legal evidence of their competence. A prolonged struggle was waged with acrimony and lawsuits between the registrationists and the anti-registrationists: the newspapers called it the "Nurses' Battle." The registrationists had logic and a princess on their side, but the anti-registrationists had Miss Nightingale.

To Miss Nightingale, registration was anathema. Nursing, she declared, could not be organized like a trade union: nursing was a Sacred Calling. Nursing should not be regarded as a business profession: it should not be followed for money-making or for weekly remuneration (a woman of wealth does not speak the same language as the woman who must count her shillings to know whether she will be able to eat or not). In her isolated exaltation, Miss Nightingale exclaimed that mothers might as well be registered as nurses (she overlooked the fact that mothers did not nurse the public). The new spirit of nursing was against Miss Nightingale, but her influence was so potent that it was impossible for nurses in her homeland to be registered while she lived, and for some years afterward. The nurses of New Zealand (1901) and of the United States (1903) were licensed to practice their profession years

before their British sisters (1919). The shortcomings of Miss Nightingale were the foibles of the pioneer.

In a letter (1856) to her beloved Mary Clarke (Madame Julius Mohl), Miss Nightingale remarked, in an aside, “. . . how much more dangerous are our moralities than our immoralities.” It is a world-tragedy that the British people have never been able to understand that phrase. Miss Nightingale concluded her letter with the confession, “I have done with being amiable. It is the mother of mischief.” The correspondence of Miss Nightingale, playful and tender on personal matters, harsh and bitter on the subject of sanitary science, was one of the manifestations of her genius. In a letter (1857) of which she kept a copy, but without the name of her correspondent, Miss Nightingale wrote:

No one can feel for the Army as I do. These people who talk to us have all fed their children on the fat of the land and dressed them in velvet and silk, while we have been away. I have had to see my children dressed in a dirty blanket and an old pair of regimental trousers, and to see them fed on raw salt meat, and nine thousand of my children are lying, from causes that might have been prevented, in their forgotten graves. But I can never forget.

A great and tortured soul is revealed in that cry.

When William Farr (1807-83) and Florence Nightingale met at dinner, it was a meeting of two “passionate statisticians,” who spoke the same language. Farr, who gave up his medical practice to plot the course and duration of epidemics (*Farr's law*), knew more about the mortality-tables of England than any other man of his time, which did not prevent him from having a “ready, spontaneous, thoroughly hearty, and most musical laugh.” Miss Nightingale remembered Farr's dinner-talk, and when she found that the death rate of young men in British barracks was almost double the death rate of young men of corresponding ages in civil life, she wrote:

With our present amount of sanitary knowledge, it is as criminal to have a mortality of 17, 19, and 20 per 1000 in the Line, Artillery, and Guards in England, when that of Civil Life is only 11 per thousand, as it would be to take 1100 men per annum out upon Salisbury Plain and shoot them—no body of men being so much under control, none so dependent upon their employers for health, life, and mortality as the Army.

It must be remembered that she always regarded herself as a soldier. Florence Nightingale was the foremost warrior of Sanitary Science.



In summary: Miss Nightingale introduced sanitary science through female nursing in military hospitals by reducing the death rate of the British Army from 42 to 2 per cent (1854-55); protested against the corridor system of hospitals and fought for pavilions (1856); printed her extensive octavo on the health of the army (1858); issued the anonymous blue book on military sanitation in which she demonstrated the frightful but preventable mortality of the recent war (1859); showed the relationship of sanitary science to medical institutions (*Notes on Hospitals*, 1859); wrote the authoritative text of modern nursing (*Notes on Nursing*, 1859); established the Army Medical School at Fort Pitt, Chatham, and chose its faculty (1860); and founded the first training school for nurses (St. Thomas's Hospital, 1860). Florence Nightingale epitomized her lifework when she wrote in a private note: "I stand at the altar of the murdered men, and, while I live, I fight their cause." Florence Nightingale was the greatest war nurse in history.

After founding her school, fifty years yet remained, for Miss Nightingale survived until the age of ninety. This half-century, except for the final period of her obese senility, was filled with incessant and fruitful toil. She never saw India, but by her mastery of statistics and study of its problems, she became the chief authority on its health, and was known as the savior of India. It passes all understanding how furiously Miss Nightingale had to fight to obtain improved barracks accommodations for the British soldier at home and abroad. The definite dividing-line between the old nursing and the new, is the demarcation between pre-Nightingale nursing and Nightingale nursing. In the sense that Hippocrates (460-370 B.C.) was the father of medicine, Florence Nightingale (1820-1910) was the founder of nursing: systematized medicine is thus an ancient art, while organized nursing is a recent art. Miss Nightingale hewed a new profession out of centuries of ignorance and superstition. The greatness and the goodness of Florence Nightingale combined to emancipate woman from the curse of not finding her work: Florence Nightingale gave to woman the blessed work of the trained nurse of the human race.

## VIII

### Background of American Nursing



#### WOMEN HEALERS AMONG THE PURITANS

FIRST MIDWIFE IN NEW ENGLAND. The bark-rigged merchantman, *Mayflower*, which brought the Pilgrims to America (1620), carried among its passengers Samuel Fuller, memorable as the first physician in New England. All Plymouth was his clinic, and in time he physicked the sick in the neighboring settlements of Naumkeak (Salem), Charlestown, and Matapan (Dorchester). His third wife, Bridget Fuller, who came over on a later voyage, established herself as the colony's earliest midwife. Such was her repute, in her subsequent widowhood, that the town of Rehoboth, Massachusetts, voted and agreed that she "should be sent to, to see if she be willing to come and dwell amongst us, to attend on the office of a midwife, to answer the town's necessity, which at present is great." The Puritans married young, and had annual offspring, many of whom perished in infancy. The midwife was regarded as a useful member of the community, except when she was suspected as a witch.

MIDWIFERY AT SEA. Even before John Winthrop reached these shores, he learned the value of the midwife, for he wrote in his famed journal, which came to be known as the *History of New England* (June 1, 1630): "A woman in our ship [*Arbella*] fell in travail, and we sent and had a midwife out of the *Jewel*. She was so far ahead of us at this time (though usually we could spare her some sail) as we shot off a piece and lowered our topsails, and then she brailed her sails and stayed for us." John Winthrop, first governor of Massachusetts Bay, was the most important man in Boston; in colonial administration, he was sensible, prac-



tical, wise; in theological interpretation, which was his chief concern, he was a prey to the darkest superstitions that clouded the human mind; the God he worshiped was a spy who spent his time watching the children of earth, and delighted to catch them in sin. John Winthrop approved the execution of men for alleged crimes which were biologically impossible, and, although he was exceedingly affectionate to his four consecutive wives, he was frequently harsh to strange women, for any unknown woman who crossed his path might be a witch.

ANNE HUTCHINSON. A few years after John Winthrop laid the foundations of Boston, there arrived in the colony a woman who frightened the governor. Soon all Massachusetts heard the name of Anne Hutchinson (1591-1643). The Puritan divine, Thomas Welde, her enemy and persecutor, described Mistress Anne as "very helpful in the times of childbirth, and other occasions of bodily infirmities, and well-furnished with means for those purposes." Anne was a religious enthusiast, and as her abilities and activities as a nurse gave her influence among the women, she gathered groups of them in her house on the pretext of discussing the sermon of the previous Sunday. Anne really held revivalist meetings, which the orthodox denounced as heretical, and she was banished from Boston for "traducing the ministers and their ministry."

Accident now came to the aid of superstition, and confirmed the worst fears of the Colonists. Among Anne's dear friends was Mary Dyer, who must indeed have been comely, since Winthrop describes her as "a very proper and fair woman." It became her misfortune to be delivered of a still-born child, and disturbing rumors were heard: this premature child was a monster. No one had been present at the confinement except the midwife, Jane Hawkins, who officiated, Anne Hutchinson, and another woman. Evidently Jane Hawkins practiced podalic version, for Winthrop reported, "it came hiplings till she turned it." The anencephalus was buried, and it was hoped to keep the matter quiet, but the other woman gave away the secret. Winthrop had the monster dug up, and described it with the minuteness of a pathologist. The implication was plain: God himself revealed the witchcraft of the trio. Misfortune followed misfortune: Anne passed a hydatidiform mole.

When Anne Hutchinson, healer and heretic, was banished from Boston, with her went Mary Dyer and Jane Hawkins. Concerning Jane

Hawkins, Winthrop wrote (1638): "The midwife, presently after this discovery, went out of the jurisdiction; and indeed it was time for her to be gone, for it was known, that she used to give young women oil of mandrakes and other stuff to cause conception; and she grew into great suspicion to be a witch." The exiles sought the refuge of Rhode Island. Jane Hawkins was gone, but not forgotten. Two years later (1640), her name again appears in the journal of Winthrop, who now delves into her past: "It was certainly known that she had much familiarity with the devil in England, when she dwelt at St. Ives, where divers ministers and others resorted to her and found it true." Anne Hutchinson, after her widowhood, settled on the shore of Pelham Bay, where she and her household, sixteen in all, were massacred by the Indians—an act in which Thomas Welde saw "God's hand." As for Mary Dyer, she adopted a religion which was poison to the Puritans; years later, she ventured to visit Boston again, and, refusing to recant, was executed for the crime of Quakerism.

THE HANGING OF MARGARET JONES. However, Mary Dyer was not the first to be hanged in Boston; she had a predecessor on the gallows in the woman healer, Margaret Jones. Only the mystic quill of John Winthrop can do justice to the career and conclusion of Margaret Jones (1648):

At this court one Margaret Jones of Charlestown was indicted and found guilty of witchcraft, and hanged for it. The evidence against her was, 1. that she was found to have such a malignant touch, as many persons, (men, women, and children,) whom she stroked or touched with any affection or displeasure or &c. were taken with deafness, or vomiting, or other violent pains or sickness, 2. she practising physick, and her medicines being such things as (by her own confession) were harmless, as aniseed, liquors &c. yet had extraordinary violent effects, 3. she would use to tell such as would not make use of her physick, that they would never be healed, and accordingly their diseases and hurts continued, with relapses against the ordinary course, and beyond the apprehension of all physicians and surgeons, 4. some things which she foretold came to pass accordingly; other things she could tell of (as secret speeches &c.) which she had no ordinary means to come to the knowledge of, 5. she had (upon search) an apparent teat in her secret parts as fresh as if it had been newly sucked, and after it had been scanned, upon a forced search, that was withered, and another began on the opposite side, 6. in the prison, in the clear day-light, there was seen in her arms, she sitting on the floor, and her clothes up &c. a little child, which ran from her into another room, and the officer following it, it was vanished. The like child was seen in two other places, to which she had relation; and one maid



that saw it, fell sick upon it, and was cured by the said Margaret, who used means to be employed to that end. Her behaviour at her trial was very intemperate, lying notoriously, and railing upon the jury and witnesses &c. and in the like distemper she died. The same day and hour she was executed, there was a very great tempest at Connecticut, which blew down many trees &c.

**SAMUEL SEWALL'S DIARY.** Samuel Sewall (1652-1730), the "last of the Puritans," is remembered as a man of courage who stood up in his pew and publicly confessed that as commissioner of oyer and terminer he had made a mistake in condemning the witches at Salem Village; he begged pardon, but, unfortunately, his victims were not there to forgive him, as they had been hanged. Sewall kept a voluminous diary, which occupies three large volumes in print, and is one of the most valuable of colonial records. To present a general picture of his time, a diarist should be a man of mediocrity, and Judge Sewall was mediocre enough to be interested in his wife's curtains and in her tarts, and in who carved at table; and he reports the weather with the steadfastness of an almanac.

The *Diary* contains numerous passing glimpses of midwives and nurses, as in the entries of April 1677:

Went home with the Midwife at 2 o'clock, carrying her stool, whose parts were included in a Bagg. Met with the Watch at Mr. Rocks Brew house, who bad us stand, enquired what we were. I told the woman's occupation, so they bad God bless our labours, and let us pass. The first Woman the Child sucked was Bridget Davenport, *April 3*. Cousin Flint came to us. She said we ought to lay scarlet on the Child's head for that it had received some harm. Nurse Hood watches. *April 4*. Clear cold weather. Goodwife Ellis watches.

A later entry introduces a nurse from Salem:

Second day of the week, about four hours before day, My Daughter Hirst was delivered of a Living lively Daughter. Her mother went to her after the forenoon exercise. Mother Hirst came the evening before. We have an Answer of Peace to our many Prayers, Laus Deo. Mrs. Wakefield was Midwife. Madam Usher, Pemberton, Hubbard, Welsted, Nurse Johnson assisted. Nurse is from Salem.

The birth of Judith is thus announced in the *Diary*:

This is the Thirteenth Child that I have offered up to God in Baptisme; my wife having born me Seven Sons and Seven Daughters. I have named this little Daughter Judith, in Remembrance of her honoured and beloved

Grandmother Mrs. Judith Hull. And it may be my dear wife may now leave off bearing. . . . This day agreed with Nurse Ranal to suckle Judith.

A passage in the *Diary* indicates that at times it was so difficult to obtain a nurse that it became necessary to resort to prayer:

The Harbor is open again, and pretty well freed from the Ice. I prayed earnestly by my self and in the family for a Nurse; Went and expostulated with Mr. Hill about his daughters failing me; in the chamber: In the mean time, one of his family went and call'd the Nurse and I brought her home with me; which was beyond my expectation. For Mr. Jesse huff'd and ding'd, and said he would lock her up, and she should not come. I sent not for her, So I hope twas an Answer to Prayer.

It is in connection with the lying-in chamber that we frequently meet the Colonial nurses. William Penn, writing with his own hand the birth certificate (1699) of his son John, mentions the midwife, Ann Parsons, and in the lower left-hand corner, "Ann Harason, Nurs," interesting as an early official reference to a nurse in Pennsylvania. Other references to Colonial nurses occur in connection with death. Just as the Bible mentions the name and death of Rebekah's nurse and the oak beneath which she was buried, Samuel Sewall wrote: "This day Aug. 4 [1710] Nurse Elizabeth Johnson dyes." The *Diary*, like Genesis, states that she was "buried near the Entrance of the old Burying-place." The Judge attended the funeral, the most conspicuous figure among the mourning women.

CONCLUSIONS FROM COLONIAL RECORDS. Whatever serviceable knowledge these women possessed, was instinctive or empirical. That they acquired experience is undeniable: Elizabeth Philipps (1685-1761), of Charlestown, Massachusetts, brought over three thousand children into the world; Dame Whitmore of Marlboro, Vermont, who was described as "frequently travelling through the woods on snowshoes from one part of the town to another by night and by day to relieve the distressed," incidentally demonstrated her endurance by reaching the age of eighty-seven. A nurse-midwife who reached the century mark was commemorated in an "Elegy on the Death of the Ancient, Venerable, and Useful Matron and Midwife, Mrs. Mary Broadwell, who rested from her labours Jan. 2, 1730, aged 100 years and one day" (Philadelphia, 1730). The Boston midwife, Ruth Barnaby (1664-1765), was sufficiently alert, when past her hundredth birthday, to insist on being inoculated against small-



pox: several younger members of her family contracted the dreaded disease, while she remained immune. It is obvious from the Colonial records that there were female physicians and nurses among the Puritans, while midwifery was exclusively in their hands, as it was everywhere considered immoral for males to penetrate the mysteries of the lying-in chamber.

There were no schools or hospitals in which Colonial women could study the healing arts, this being a sequela of the ecclesiastical theory that women had no souls. In educational matters, the Colonies derived their wisdom from the elder countries: a council at Wittenberg (1595) undertook to ascertain whether women were entitled to be called human beings, but unfortunately left the problem undecided; on the other hand, the debate at Oxford (1608), whether women were worthy to attend lectures in moral philosophy, was concluded with a definite vote in the negative. The theocratic John Winthrop was openly anti-democratic, and had he heard of a movement in his day to instruct females, he would assuredly have regarded the suggestion as the workings of satanic malice.

## NURSING IN THE AMERICAN REVOLUTION

COLONIAL HOSPITALS. The medieval Church, as the mother of hospitals, brought forth these institutions in Catholic America before they were born in Protestant America: still existent are the sixteenth-century Jesus Hospital of Mexico (1524), and the seventeenth-century Hôtel-Dieu of Quebec (1639) and Montreal (1644). There was no general hospital on the soil of the United States until the eighteenth century: Philadelphia General Hospital, known as "Old Blockley," which opened as an almshouse (1732); Bellevue Hospital of New York, which opened as a workhouse (1736); and Pennsylvania Hospital, which opened as a hospital (1751), continue to contend for the title of "America's Oldest Hospital." William Shippen's private institution (1762) in Philadelphia, "a convenient lodging, under the care of a sober, honest matron, well acquainted with lying-in women," was our first maternity hospital. The Mad House (1768) at Williamsburg, Virginia, now the Eastern State Hospital, was the first insane asylum in Colonial America.

HOSPITALS IN THE AMERICAN REVOLUTION. In the last quarter of the eighteenth century, the Colonies united to form a new nation: freedom is not granted without struggle, and every Declaration of Independence, though signed in ink, is sealed with blood. After the battle of Bunker Hill, in which the physician-general Joseph Warren died a hero's death, his youthful pupil and brother, John Warren, took charge of the wounded at Cambridge, "in several private but commodious houses," which may be regarded as our first military hospital (1775). The Delaware-born army surgeon, James Tilton, who introduced the Indian-hut system in the "hard winter of 1779-80, when the army was hutted near Morristown," gained recognition as a pioneer American student of hospitals. In this century, when the hospitals of England and France sank to the nadir of institutional horrors, the hospitals of the Revolution were unsparingly condemned by Benjamin Rush (1745-1813):

Hospitals are the sinks of human life in an army. They robbed the United States of more citizens than the sword. Humanity, economy, and philosophy, all concur in giving a preference to the conveniences and wholesome air of private houses; and should war continue to be the absurd and unchristian mode of deciding national disputes, it is to be hoped that the progress of science will so far mitigate one of its greatest calamities, as to produce an abolition of hospitals for acute diseases. Perhaps there are no cases of sickness in which reason and religion do not forbid the seclusion of our fellow creatures from the offices of humanity in private families, except where they labour under the calamities of madness and the venereal disease, or where they are the subjects of some of the operations of surgery.

THE FLYING CAMP OF 1776. In a more specific criticism of the general hospital, James Tilton (1745-1822), declared:

The ignorance and irregularities of the men, in a new scene of life, subject them to numberless diseases. The sick flow in a regular current to the hospitals; these are crowded so as to produce infection, and mortality ensues too affecting to be described. Our revolutionary army exemplified this misfortune in a manner shocking to humanity. The flying camp of 1776 melted like snow in the field; dropped like rotten sheep on their straggling rout home, where they communicated the camp infection to their friends and neighbors, of whom many died.

Escaping death by the narrowest margin, Tilton journeyed home to his native Delaware; on the way he rested in the hospital at Bethlehem, Pennsylvania. He soon learned he was not visiting a health resort: before his arrival, not an orderly, man, or nurse had escaped infection, and



but few of the surgeons; of a fine volunteer Virginia regiment, forty had entered this hospital and only one lived to fight again for his country.

MRS. KERENHAPPUCK TURNER. During the Revolution there was no attempt at organized nursing by women; the nursing was improvised and individualistic, occasionally ingenious. The exploit of Mrs. Kerenhappuck Turner, who rode from Maryland to North Carolina to nurse a wounded son, has been described by a descendant:

One of her sons received a fearful wound. Word was sent to his mother and she came to him riding on horseback all the way from her home in Maryland. Placing him in a log-cabin on the Guilford Battle Ground, in a crude bed on the floor, she secured tubs in which she bored holes. These tubs she suspended from the rafters and filled with cool water from the Bloody Run which flows nearby. The constant dripping of water on the ghastly wounds allayed the fever and saved her son's life. In this manner did Mrs. Turner improvise a treatment as efficacious as the ice-pack of modern science, and on the spot where this rude cabin stood, the Guilford Battle Ground Company erected a statue in her honor.

MRS. MARY SLOCUMB. At the time of the battle of Moores Creek Bridge in North Carolina, Mary Slocumb, sleeping uneasily, dreamed of a bloody body wrapped in her husband's cloak. Mounting her horse, she rode all night through the forests until she reached the firing line. By the road, under the trees, sprawled a group of wounded men, and she could not help feeling that among them she would find her husband dead. As she groped among them, an unknown voice, echoing the voice of all the battlefields in history, begged for water. Looking about, Mary Slocumb picked up a camp kettle, and, from the near-by stream, brought drink for the soldier. With a piece of his trouser and heartleaves she dressed the wound in his head and the profusely flowing wound on his leg. She washed the filth from his face and recognized a neighbor. She went from soldier to soldier, applying nature's dressing, offering life-saving water. As she knelt at her work, she looked up, and there stood her husband Ezekiel ("as bloody as a butcher and as muddy as a ditcher"). It was an interesting meeting, as the captain told her of the glorious victory which the Americans had won against the tories, but there was little time for celebration. Again mounting her horse, Mary Slocumb rode off in the middle of the night through the wild woods to return to her home and little child. The years passed, and husband and wife

slept side by side in the waiting bosom of Mother Earth. Within recent years, a monument on the battlefield was unveiled to the memory of this amateur nurse of 1776; the five thousand people who were present, heard anew of the heroic deeds of Mary Slocumb.

WASHINGTON'S MEDICAL MEMORANDUM. The American authorities were not indifferent to the condition of military hospitals, but the new government was occupied with the burden of the political revolution; lacking funds, power, and perception, it could not simultaneously undertake the far more difficult task of a sanitary revolution. After his first inspection as commander-in-chief of the army, General Washington sent the following memorandum to the president of Congress: "I have made inquiry into the establishment of the hospital, and find it in a very unsettled condition. There is no principal director, nor any subordination among the surgeons; of consequence, disputes have arisen, and must continue until it is reduced to some system. I could wish it was immediately taken into consideration, as the lives and health of both officers and men so much depend on due regulation of this department."

WASHINGTON AND WOMEN NURSES. At the threshold of the new nation the need was felt for women as nurses to replace the male orderlies and convalescent soldiers who were acting in that capacity. At Middle Brook, Washington himself issued the order (June 17, 1777): "that a proportionate number of women, to the sick of each regiment, shall be sent to the Hospitals at Mendham and Black River, to attend the sick as nurses." Valley Forge has been termed the Gethsemane of the Revolution. From its depths General Anthony Wayne growled in disgust: "The whole Army is sick and crawling with vermin." In the bitter winter, in the midst of putrid fever, the tortured soldiers had neither food nor shelter, neither clothes nor shoes. So many soldiers were serving in the hospitals that James Craik informed Jonathan Potts (May 1, 1778): "The General desires all the orderlies to join their regiments by the first of June, and we have already had some scuffling with several colonels about them. I wish some method could be fallen upon to employ women that can be depended on. The General says we may enlist them for at least the same money as are paid soldiers, for he can no longer bear having an army on paper and not have them in the field."



James Craik (1730-1814), a native of Scotland and graduate of Edinburgh, practiced medicine in the West Indies and later in Virginia, where he became acquainted with a pockmarked yet handsome soldier of the frontier, a young giant who spent much of his time in the saddle. They formed an unbreakable friendship, and together went into the wilderness on horseback and along the rivers by canoe. In the gestation period of the new nation, they were again united: George Washington as commander-in-chief, and James Craik as chief physician and surgeon of the Continental Army. After the war, by mutual desire, the home of Craik was close to the home of Washington. In the will of Washington is written the clause: "To my compatriot in arms, and old and intimate friend, Dr. Craik, I give my bureau (or, as the cabinet makers call it, tambour secretary), and the circular chair, an appendage of my study." It would be interesting if it could be recorded that this physician had some influence on the progress of nursing in America. Such, however, is not the case, and the hope he expressed to his distinguished colleague, Jonathan Potts, "I wish some method could be fallen upon to employ women that can be depended on," fell upon the barren soil of his age.

THE AFTERMATH. War, with its sudden collections of sick, wounded, and maimed, stimulates the progress of medicine: "The War of the Revolution was the making of medicine in this country." In the change from colonial to national medicine, the casualty was woman: woman was not ignored, she was expelled. The female practitioner, denied the opportunity and instruction of the new time, ceased to exist. Trained male obstetricians, invading the lying-in chamber, thrust out the immemorial midwife. As later expressed by a Boston physician (1820): "It was one of the first and happiest fruits of improved medical education in America, that females were excluded from practice; and this has only been effected by the united and persevering efforts of some of the most distinguished individuals of the profession." In the male monopoly of medicine, there was no room for the trained nurse: any grandmother, any destitute old woman who could be hired, was requisitioned as nurse, and none other was desired.

## THE HOSPITALIZED SOLDIER IN THE WAR OF 1812

JAMES MANN'S "MEDICAL SKETCHES." The War Hawks of the Twelfth Congress, by eloquent portrayal of Anglo-Indian violations of the frontier and by denunciation of maritime outrages, secured the vote for the war: having done their part, they left to others the boresome details of monetary, military, and medical preparation. The utterly inadequate care of the sick or wounded soldier was one of the most disgraceful aspects of the confused War of 1812. The dominant figure of Benjamin Rush was still honored as the father of American medicine, and all his disciples were furious bloodletters. Even when a soldier had been shot or stabbed, James Mann would immediately proceed to bleed him further: "The more blood expended the better, in wounds of the viscera, provided life is not exhausted, when hemorrhage is stopped. It is good practice to bleed in all cases of wounds of musket balls, or bayonet, where there is but little loss of blood from the wound." The incapacitated soldier was frequently neglected, and when he was treated the treatment was often worse than the neglect.

It is principally through the eyes of this James Mann (1759-1832) that we are enabled to see the hospitalized soldier of the War of 1812. Mann entered medicine through the preceptor system, and the doctor's title of his latter years was an honorary degree bestowed by Brown University. Mann, at twenty, was surgeon of the Fourth Massachusetts Regiment in the American Revolution; an experienced hospital surgeon, in the War of 1812, he was placed in charge of the medical department on the northern frontier. He was a vain, opinionated, hard-working physician, efficient and scholarly according to the standards of his time. His thesis on dysentery won the Boylstonian prize medal (1806), and a decade later, he gave to his contemporaries and to posterity the completest medical description of the war in *Medical Sketches* (Dedham, Mass., 1816).

HOSPITAL IN VERMONT. The attendants or nurses were males, and the references to them, whether by Mann himself or by the hospital surgeon's mate (assistant surgeon), were never complimentary. After the British army invested Plattsburgh, the sick Americans were removed to Crab Island in such haste that no straw was procured for their accommodation.



During two or three days of rainy weather, they were lodged under tents upon wet ground. Fevers of different forms and diarrheas afflicted many of the troops. Burlington Hospital in Vermont was twenty-five miles across Lake Champlain, but the larger transports were needed to carry munitions. When the boisterous winds subsided, and the waters became smooth, the patients were placed in open bateaux, and conveyed to the hospitals, the last of the men arriving on the day of the memorable battle between the fleets.

**THE NURSING SERVICE.** A common diagnosis was "dysentery with typhus fever, accompanied with great heat." Mann's assistant thus criticized the nursing service:

The utmost caution, as to the dietetic management, was highly necessary. Nature was not always correct in her calls, in this disturbed condition of the bowels; the patients frequently demanded articles which proved very injurious. It was frequently the case that the sick would obtain from their attendants cider, beer, &c. These weak fermenting drinks always proved injurious. If the patients wished for acidulated beverage, vinegar diluted with water was grateful; it allayed thirst, and never proved detrimental. Ardent spirits, in the first stages of the disease, were prohibited; and when given by the over officious nurse, invariably augmented all the symptoms of disease.

**HOSPITAL SURGEON'S MATE.** In the action at Sackett's Harbor, a private received in his leg grapeshot which shattered the tibia and fibula. The youthful hospital surgeon's mate who took off the leg, thereby performing his first amputation, concluded his remarks as follows:

Upon the 4th or 5th day, the dressings were removed; the adhesive straps had not adhered with sufficient force; the lips of the integuments had separated to the distance of an inch or more. New strips were applied, and the lips brought together as near as possible without using force. This man was afterwards dressed by others, and confined in a room with many, both wounded and sick with typhus. He, in a few days, was also seized with the fever, and died in about thirty-six days after the amputation. Had this patient been removed from a foul, crowded hospital, as soon as the limb had been taken off, and received that attention his case required, there is little doubt but he would have recovered in a reasonable time. But, without charging the surgeons or nurses with negligence, it is not to be expected that 150 wounded men could receive every necessary attention which their sufferings demanded.

**HOSPITAL AT SACKETT'S HARBOR.** To these remarks, Mann adds the following comment:

This case was attended at Sackett's Harbor, where the author was not at the time. He has heretofore observed, that no infectious disease was generated at those points where he performed duty. The above patient, agreeably to the statement, lost his life in consequence of being placed in a foul hospital. If an hospital is foul, no person but the director can be censured. When patients die in foul hospitals, the surgeons are as culpable for their deaths, as if they had been improperly treated by medicine or wholly neglected. A foul hospital is no excuse for want of success in practice.

**ONE-STORY HOSPITALS.** Mann explains why military hospitals should never be more than one story in height: "The attendants of a second story have additional duty to perform; the sick in the wards beneath are incommoded by the necessary noise of walking on the floors over their heads. In the upper wards the observance of cleanliness is with difficulty enforced. Attendants, rather than give themselves the labor of descending a flight of stairs to execute their duty, take liberties of throwing filth from windows above, to the annoyance of patients below, without possibility of detection." Female nurses, who have since climbed endless stairs, may pause and wonder why their sturdy male predecessors found it so difficult to manage a single flight.

**HOSPITAL PRESCRIPTIONS.** Mann inveighed against hospital prescriptions in Latin, insisting they be written in English so nurses could understand the directions:

The more than useless parade of prescribing in a dead language, should be dispensed with in hospital practice. Physicians of all nations, except the British, write their prescriptions in their own languages. No cogent reason can be assigned, why we should continue to imitate a practice, which originated at a period of general ignorance, when learning was confined to a few men, who wore gowns and full wigs. Prescriptions and directions in hospital practice, should be plainly written in an intelligible language, on a book left with the nurses in the several wards; by which, during the absence of the attending surgeon, they may govern themselves, after the prescriptions are made up. By this improvement, all unpleasant accidents may be avoided.

**SERGEANT AS NURSE.** In illustration of his contention, Mann, who often indulged in sarcastic allusions to his colleagues, pays a tribute to a sergeant: "During the winter 1813-14, there was attached to the hospital under my immediate care at Malone, a faithful sergeant; with whom was intrusted the medicine for fifty patients, with directions for each in plain



english. This sergeant, without any assistant, administered the medicine daily for six weeks; and executed this duty with the greatest precision and punctuality." Evidently, the fifty patients were sufficiently considerate not to exhibit any unexpected or untoward symptoms during the six weeks that the accurate sergeant fulfilled the duties of a nurse.

**MEDICAL STUDENT AS NURSE.** As in the days of Hippocrates, so in the War of 1812, medical students sometimes served as nurses, a habit which met with Mann's hearty approval:

It would be convenient that stewards and ward-masters were acquainted with the *materia medica*, and the several compositions employed in practice. Such aid during the war was most acceptable, when the hospitals were crowded with numbers greater than the surgeons present could, with all their industry, properly attend. It is not unfrequent, that students in medicine, who have acquired a partial medical knowledge, are found willing to accept such appointments, for an opportunity of further improvement. Such industrious, ambitious young men are highly useful in extensive hospitals.

**UNGOVERNABLE ATTENDANTS.** Faithful sergeants and medical students were not always available, and Mann frankly admits that to obtain attendants for the flying hospitals the worst of soldiers were at first selected:

On the Niagara, we were under the necessity of selecting stewards and ward-masters from the line; and were dependent, in the first instance, upon details from the army for our attendants, who, unfortunately, were men of incorrect habits and bad dispositions. It was understood, such were designedly selected for this permanent duty, as were obstinate and ungovernable; men upon whom no dependence could be placed. So illy disposed were they to perform, and totally unqualified to execute the duty assigned, they were immediately ordered to rejoin their several corps. Thus disappointed, no further requisitions were made on the adjutant general of the army for attendants during the war; but they were selected from the convalescents, who were retained for this service. From among these we were always able to obtain men of happy dispositions, who were kind to the sick, and whose unremitted attention was a constant pledge of their fidelity.

**TRAGEDY IN THE GREAT NORTH WOODS.** The village of Malone in northeastern New York, near the Canadian border, is the open door to the Great North Woods in the foothills of the Adirondacks: in this pleasant place was enacted one of the tragedies of the war. Mann, expecting the arrival of a thousand patients explained to the commander-in-chief (Feb. 5, 1814):

Every house in this village, which can be procured at this time, is appropriated to the use of the sick. It is not possible to do justice to these unfortunate men, destitute of bed-sacks, and wanting additional blankets. These men were sent on without attendants or nurses, without kettles, pans, and cups; destitute of even an axe to cut their own wood. These evils are accumulating; while writing this, several loads of sick have arrived in a deplorable condition. It is now understood, the sick of the army are all on their way to this place. In what manner these invalids are to be covered from the weather is not known. And if secured from the inclemency of the season, how are they to receive medical aid?

THE WOMEN OF MALONE. Mann's only reference to women occurs in this communication from the General Hospital of Malone:

Many of the sick want not only sacks and blankets, but common clothing. It may be alleged, these men have received all their clothing due. Admitting this as a truth, shall men be left to suffer? Cannot some measures be adopted to remedy evils resulting from loss of their apparel, whether their wants are the consequences of unavoidable casualties, carelessness, knavery or folly? Of the means of cleansing such articles of clothing as we have on hand, we are destitute; not having a sufficient number of men in health to perform the labor of washing. Women in this part of the country will not do this duty for others, although they may for themselves. Humanity shudders at the appearance of distress, whatever may be the causes.

What was the matter with the women of the village of Malone?

A HUMANITARIAN'S LIMITATIONS. When Mann felt deeply, he expressed himself freely, and was capable of such aphorisms as: "Of what use can it be to send a dying man to the hospital, except to give the hospital department the credit of killing, and trouble of burying him." In his letter (Nov. 6, 1814) to Elbridge Gerry, who was then vice-president of the United States, Mann reveals himself as a humanitarian by his pioneer appeal for government support of the disabled soldier: "Let a corps of invalids be established. This corps should be considered honorable, as being composed of veterans, disabled in service. It should be considered as the most honorable military institution in the nation." Evidently, Mann could think for himself, but it never struck this hospital surgeon, who saw ruffians and scoundrels detailed to duty as nurses for sick soldiers, that devoted women should be trained for this work. Such a suggestion would have required a social and educational revolution for which neither Mann nor his age was ready.



## SUMMARY AND COMMENTARY

The seas are not so wide as to wipe out prejudice, nor ever are the hills so high as to overtop human intolerance: the original settlers carried with them the bigotry of the Old World into the New World. The Pilgrim Fathers, like the Church Fathers, had not yet forgiven Eve for causing the fall of man. They agreed with the dictum of Tertullian: "Woman, thou shouldst ever go in mourning and sackcloth, thine eyes filled with tears, for thou hast brought about the ruin of mankind." They accepted the verdict of canon law: "Man only is created to the image of God, not woman; therefore woman shall serve him and be his handmaid." Both by ancient tradition and English common law, woman was without civic, educational, and economic rights, yet it was at this period that Blackstone, the most celebrated of English jurists, uttered the pronouncement (1765): "The disabilities a woman lies under, are for the most part intended for her protection and benefit, so great a favourite is the female sex in the laws of England."

In the troubled days when John Adams exchanged the pleasure of his fireside for the sessions of the Continental Congress, Abigail Adams, letter writer extraordinary, importuned her husband by post "to remember the ladies and be more generous to them than your ancestors." The American Revolution, however, made no change in the social status of woman. The new nation exhibited vitality, and astonished Europe with its innovations, though not in the realm of sex. The eighteenth century twisted Satan's tail, and the nineteenth century drove him underground: woman ceased to be the agent of Satan, and became the angel of the Lord. Woman stood on a pedestal, and whenever she moved she was regarded with suspicion. Some women did not consider the new situation an improvement.

In peace and war, the women of America shirked no duty and flinched no hardship, yet the legend persisted that they lacked the mental capacity, the physical endurance, and the moral stamina for any work requiring these qualities. Strangest of all was the paradox that though it was woman's mission to care for the sick and suffering, yet if she were trained to do so, the foundations of society would be undermined. The ordeal of the Civil War matured America; by that time America had made

many contributions of first rank in medicine and surgery, but not a single contribution to nursing. The brochure by the eminent gynecologist, Horatio Robinson Storer, *On Nurses and Nursing* (Boston, 1868), is filled with nothing but the old pious platitudes, and such preachments continued for years to come. A century elapsed from the date of the Boston Tea Party (1773) to the opening of America's first Nightingale school for nurses (1873), and many believed that, of the two experiments, the latter was the more daring.



## IX

### Nursing in the Civil War



#### NURSING IN THE NORTH

PRELUDE. On the battlefields of the Revolution, the deeds of Margaret Corbin and of Molly Pitcher made their names known to every American schoolchild; in the westward trek during the covered-wagon era, the pioneer women of America were found on every frontier; a woman from Connecticut, whose lyric, "Rocked in the Cradle of the Deep," was known all over the country, also wrote textbooks which were used in many schools; a woman from Massachusetts whose conversation earned the esteem of our foremost authors, established and edited the first philosophical journal in America; a woman composed the novel which made the Civil War inevitable, and another woman gave the nation its most stirring bugle-call, "The Battle Hymn of the Republic." Yet the legend persisted of the fundamental inferiority of the female. Her intellectual development or spiritual evolution was considered of little importance: the one duty of woman which really mattered was the preservation of her chastity.

ELIZABETH BLACKWELL. At the outbreak of the Civil War, there was no group of trained nurses in this country; after the first battles, the need for nurses became imperative. The woman best qualified to organize army nurses was the English-born Elizabeth Blackwell. Aside from her technical knowledge, she was intimate with the Mother of Nurses, and could have persuaded her friend to come to America. (Florence Nightingale lay on an invalid's couch, unable to ride in a carriage through the streets of London, but the smell of a battlefield would have cured her.) In the parlor of a little Infirmary and in the auditorium of Cooper Union, Eliza-

beth Blackwell issued the first call to the women of New York to organize for work in the war. She asked for nurses, and sent nearly a hundred volunteers for brief instruction to Bellevue Hospital. At this point Elizabeth Blackwell withdrew from the scene, for she suffered from a handicap that overshadowed her merits.

Twelve years before the war, this woman had been so unmindful of masculine vanity that she had graduated from the Medical Institution of Geneva, New York (1849). Her alma mater, terrified at its own heresy, concealed her sex in its catalogue as "E. Blackwell," and barred the door when her sister attempted to follow in her footsteps. Reputable ladies ostracized the early medical women of America, and landlords refused to rent them apartments for offices. The opinion of society was expressed by an editorial writer who thundered in the pages of the *Buffalo Medical Journal*: "If I were to plan with malicious hate the greatest curse I could conceive for women, if I would estrange them from the protection of women, and make them as far as possible loathsome and disgusting to man, I would favor the so-called reform which proposed to make doctors of them." Elizabeth Blackwell, as the originator of the dangerous brood, was singled out for special attack. The animosity of the male physicians, mingled with envy, grew intense enough for Elizabeth Blackwell to realize she could not lift that particular curtain of prejudice. She retired to the Infirmary which she and sister Emily had established, and ceased to participate in sanitary aid for the army or in the organization of nurses. In the national crisis, the medical profession was spared the irritating presence of America's first woman doctor.

DOROTHEA LYNDE DIX. Women were needed and women were wanted, but they must know their place, and that place was a subordinate one. There could be no objection to a former New England schoolteacher of irreproachable character, who was neither a physician nor a nurse. A spinster of sixty, who combed her hair flat and drew it severely into a knot at the back of her head, was appointed Superintendent of Women Nurses, later signing herself Superintendent of U. S. Hospital Nurses: she was the first woman in charge of the nursing forces of our country. She was unpopular with many surgeons and nurses who complained that she was arbitrary, opinionated, capricious; and her accusers were sometimes right. In the prevailing ignorance and confusion, in the frantic



call for nurses when there were no nurses, what appointee could have silenced the clamorous and contradictory voices? She was one of the most celebrated women in the world, yet anonymous as a nun: had she lived in an earlier age and been a medieval Catholic instead of a Boston Unitarian, the name of Saint Dorothea would have been enrolled in the hagiology.

Of the childhood of the Maine-born Dorothea Lynde Dix (1802-87), little is known, for she herself hid the secret, except to say she never knew childhood. Like Mary Wollstonecraft, Miss Dix was the daughter of a worthless father. Family conditions were intolerable, and at the age of twelve she left home; throughout a long life she never had a home. The young girl sought refuge with her grandmother who lived in the Dix Mansion in Boston. There was no love or laughter in grandmother's house; cold as a convent, rigid as a prison, at least that Puritan abode was stable, respectable; one could stay there and arrange for an education.

Her accidental discovery, while conducting a Sunday-school class in the East Cambridge House of Correction, that the mentally ill were confined to unheated cells in jail and treated worse than wild beasts, was the goading-point of her mission. Sending her trunk ahead, carrying a valise with her, wearing a gray dress with snow-white collar and cuffs, Miss Dix traveled throughout America on her mission, by railroad, steamboat, stagecoach, carriage, and wagon. There were thousand-mile journeys from Halifax down to Texas, and from New York across to San Francisco. Trains were crude, slow, filthy, and warmed by box-stoves in those days; nothing was certain about them except that they were jarringly uncomfortable. She saw the introduction of the early sleeping cars, and it is not surprising that she refused their dubious comforts. She continued to "sit bolt upright through such an infinity of nights." The doctors told Miss Dix she ought to rest in bed, and she covered more territory in inconvenient conveyances than any other individual in America.

Miss Dix was fourteen when she became a schoolteacher; she was twenty-two when she wrote her first book; she was almost forty when she descended into the depths and found her work. This shy-mannered, low-voiced, deeply-blushing, publicity-shunning woman seemed prodded by frail health to the chronic rocking-chair of middle-aged invalidism:

instead, she embarked on an earth-covering, nerve-wrecking crusade, prolonged for forty years. She emerged from the infernos of her native land and of foreign countries as the Apostle of the Insane. Beginning with local investigations, her work grew national, and after addressing the legislatures of the states, she was able to assert in her first "Memorial to the Congress of the United States" (June 23, 1848):

I have myself seen more than nine thousand idiots, epileptics, and insane in these United States, destitute of appropriate care and protection; and of this vast and most miserable company, sought out in jails, in poorhouses, and in private dwellings, there have been hundreds—nay, rather thousands—bound with galling chains, bowed beneath fetters and heavy iron balls attached to drag chains, lacerated with ropes, scourged with rods, and terrified beneath storms of profane execrations and cruel blows; now subject to gibes and scorn and torturing tricks, now abandoned to the most loathsome necessities, or subject to the vilest and most outrageous violations. These are strong terms, but language fails to convey the astonishing truths. I proceed to verify this assertion, commencing with the State of Maine.

No state in the Union escaped Miss Dix's exposure of inhumanity toward fallen humanity. It was an indictment of sin which a Christian nation, or any other nation, could hear only in profoundest shame.

In Miss Dix's day, in this vast land of ours, there lay unassigned in the public domain more than one thousand millions of acres. Miss Dix proposed that ten million acres be devoted to a national refuge for the indigent insane, and two and a quarter million acres be set aside as a home for the destitute blind and deaf and dumb. In requesting twelve million, two hundred and twenty-five thousand acres, Miss Dix must have realized she was asking for territory about thrice the size of the state of Massachusetts, but it merely meant that Mother Earth was finally opening her arms to her disinherited children. The medical superintendents of American Institutions for the Insane endorsed "the magnificent project"; such leading alienists as Thomas Story Kirkbride and Luther Vose Bell were as eager as Miss Dix herself; the press and public opinion were at last solidly on her side; then both the Senate and the House of Representatives of the United States passed the measure. Congratulations from all over the country flooded Miss Dix's mail, for nothing was now needed except the presidential signature, and that was a foregone conclusion. It was not deemed possible that the neutral and courteous chief executive, a seeker of harmony and popularity, would



refuse to sign. The incredible happened: Franklin Pierce vetoed the 12,225,000 Acre Bill. It was a defeat which made the vanquished a national heroine.

Miss Dix feared nothing except the Atlantic Ocean—some of her dearest friends had been drowned in those waters—yet in behalf of her crusade she crossed that barrier too, and became known as the “American Invader.” Her visit to Scotland revolutionized the lunacy laws of that country; she journeyed to St. Petersburg and Moscow, and reached Scutari and Constantinople (she was astonished to learn that the barbarous Turk treated his insane with much more gentleness and understanding than the Christian nations). The life of Miss Dix was a struggle with unchanging politicians, brutal asylum keepers, and an apathetic public opinion which she succeeded in arousing. This modest woman, who colored so easily when anyone looked at her, confronted legislatures, congress, parliament and pope. Without any authority, she challenged constituted authority; she retained her gentle manners and musical voice, but she was imperious, implacable, irresistible.

Daniel Hack Tuke, the British physician who was himself a leading worker in the warfare for the rational treatment of the insane, characterized Miss Dix as “that terrible reformer, but gentle lady.” In Rome, Miss Dix went down on her knees and kissed the hand of the pope, but she did not hesitate to inform the Anointed Vicar of Christ on Earth that “in the light of modern knowledge and humanity, the insane asylum of the Holy City was a disgrace and a scandal.” Shocked and surprised, Pio Nono drove unannounced to the insane asylum, and the Shepherd saw what was being done to the most helpless sheep of his flock. At the next audience, the pope confessed to Miss Dix that she had spoken the truth. Another Catherine of Siena had knocked on the door of the papacy, but this time it was a Protestant woman from America. The earliest mental hospitals in Japan, at Kyoto and Tokyo, were directly the handiwork of Miss Dix. She spoke of her asylums as her children, and her family grew with the passing years. She either enlarged or erected anew over thirty institutions for the mentally ill, and thus ranks with the greatest hospital builders of medieval or modern times.

When Miss Dix appealed to her friend Whittier for the translation of an Arabic inscription for a drinking fountain, which she was donating to the draft horses of Boston, the poet wrote to her from Oak Knoll: “Such

a gift would not be inappropriate for one who all her life has been opening fountains in the desert of human suffering." Because she had "passed over the dry valley of Baca, making it a well"; because her name had become synonymous with compassion, her country, in its fratricidal crisis, put its sick and wounded defenders in her care. Miss Dix began her new work with a manifesto: "No woman under thirty years need apply to serve in government hospitals. All nurses are required to be very plain-looking women. Their dresses must be brown or black, with no bows, no curls, no jewelry, and no hoop-skirts."

Miss Dix's unique circular caused much feminine wailing throughout the land. It was the era of immense hoop-skirts, and many women actually believed they could not walk without hoop-skirts. There were girls in their teens, burning with patriotism, insistent on volunteering for nursing, yet, by no disguise or device, could they bring the crow's-feet of age to their smooth young faces. Moreover, there were women who easily met the age requirements, but being assured by their friends that they were as good-looking as ever, if not more so, wondered if they could pass the difficult test for homeliness. An ideal application was filled by Mary Gardner Holland: "I am in possession of one of your circulars, and will comply with all your requirements. I am plain-looking enough to suit you, and old enough. I have no near relatives in the war, no lover there. I never had a husband, and am not looking for one. Will you take me?" According to Miss Holland, Miss Dix accepted her at once and labeled her so nicely that, had she been a box of glass, she would have reached her hospital assignment safely.

It should not be inferred from the unmarried Miss Dix's unique circular that she was an embittered old maid. In private life, she was a skillful matchmaker, and on several occasions hers was the hand behind the wedding bells ringing out for happy young couples whom she had brought together. It was her conviction, however, that when war begins, romance must end. She was wrong, for nature does not work that way. Despite all that Miss Dix could do, her circular was as fruitless as Dame Partington's efforts to push away the Atlantic Ocean with mop and patens. Not only did many of Miss Dix's nurses find husbands in the service, but some of them married their first soldier-patient. Neither Miss Dix nor anyone else could change this situation. As an ex-schoolteacher, who



had once taught Greek mythology, Miss Dix should have remembered the connection between Mars and Venus.

The army medical department was utterly disorganized. Throughout the Civil War, so alert a surgeon as William Williams Keen never saw a thermometer, a hypodermic syringe, or a hemostatic forceps. Despite Paré of the Renaissance, the ends of arteries were still burned with the actual cautery, to stop the flow of blood after amputation. The flaxseed poultice was in constant use to stimulate the flow of laudable pus. Every amputation-stump was dressed with a Maltese cross of cerated lint, with numerous ligatures hanging out of the wound, the knotted ones indicating the larger vessels: when tested or pulled upon, a gush of blood meant secondary hemorrhage. Malaria and Woodward's typho-malaria brought vast numbers to their cots or coffins; epidemic erysipelas and hospital gangrene swept through the wards like unchecked hurricanes; the mortality of pyemia was 97.4 per cent. Such is human resistance and vitality that many soldiers survived their disease and operations, but many were sacrificed to the medical and surgical ignorance of the time.

As summed up by Keen:

A comparison between the danger of immediate death in battle from wounds in the Battle of Gettysburg, and of the danger of death from the surgery of Civil Life in the 60s, shows that it was seven times safer to fight all through the three days of Gettysburg than to have an arm or leg cut off or to be run over and suffer a compound fracture of the leg and be treated in a city hospital, with the septic surgery we then practised.

The women who responded to Miss Dix's call, or managed to become nurses without her knowledge, represented all the social strata of American life from serving-maid to governor's lady. Untrained, un-uniformed, unrecognized, encouraged by some surgeons and snubbed by others, shifted about with the varying fortunes of the war, working in the pre-antiseptic era when the same washbasin was employed for an entire ward, when the sponge hid a menace and the bandage carried infection, when a slight wound or minor operation was often the prelude to lock-jaw, when diarrhea and dysentery were more fatal than the Minié ball, when disease wrought more destruction than the weapons of the enemy, these women saved more than 184,000 soldiers from the grave.

The record becomes all the more impressive because of the appalling conditions under which it was achieved. Many of the hospitals were

hastily improvised with the essential equipment unobtainable. The nurses worked by the dim light of candle stubs or army lanterns, sometimes in thick dust, sometimes in frost. Their hands were swollen, their feet blistered, and they could not escape the most familiar of all visitors, the Civil War louse known as the grayback. With its six little hairy legs this ubiquitous pest crawled all over the army, giving rise to the conclusion, "It is no disgrace to get graybacks, but it is a disgrace to keep them." Dusky typhoid, invariably treated with turpentine, was extremely prevalent: bowel discharges were not disposed of, and the swarming flies were unmolested. Strong, strapping fellows, unharmed by bullet or bayonet, succumbed to the filth-disease, and their nurses followed. Some nurses died through accident or by enemy fire, but more names were added to the martyrology of nurses by overwork and infection.

To the soldier dreaming of home, in camp, bivouac, transport or hospital, the nurse was woman; she was mother, sister, wife, sweetheart. Again and again soldiers in their teens, and sometimes older men, died, holding the hand of the nurse, whispering, "Mother." She was soft as flax and hard as steel. She slipped in blood, and waded through gore. She faced unnatural horrors and did not falter. She endured inhuman hardships, her only reward the gratitude of sick and wounded men. The soldiers welcomed her, cheered her, loved her. The coming of the female nurse meant change of linen and bandages, it meant hot soup and good coffee. She was the link with life at home; she was the promise of the future. No one had foreseen, nor could have anticipated, such a prolonged and bloody struggle. The Civil War was the price of a nation's survival, but the years 1861-1865 were the horror-years of the nation. America, divided against itself, was murdering itself. The soldier found himself in an unprecedented trap. But he was not alone. The womanhood of America, represented by its volunteer nurses, stood at his side.

YANKEE NURSES. Of the two thousand nurses who served in the Civil War, many became widely known. In later life, Clara Barton founded the American Red Cross. Mary Ashton Rice Livermore, a leading figure of the war, visited army posts and hospitals, and made an amazing record of efficiency by her management of the Northwestern Branch of the United States Sanitary Commission. Mary Ann Ball Bickerdyke, the adored Mother Bickerdyke of the army boys, was the most picturesque



of the nurses, and the most pugnacious in fighting for the rights and comforts of the common soldier. The experience of Louisa May Alcott as a nurse in the Union Hospital of Georgetown, resulted in her first famous book, *Hospital Sketches* (1863). Emily Parsons, because of her family connections, was enabled to receive instruction for a year and a half from the medical and surgical staff of the Massachusetts General Hospital before there was a training school in America, and thus was one of the few nurses of the time with hospital experience. Sarah Edson may be regarded as the most forward-looking nurse of the war, as she was the first (1862) to suggest a combined home and training school for nurses, and to initiate, under Masonic auspices, an Army Nurses Association.

In *Women of the War* (1866), it was stated that if the government ordered a gold medal given to the woman who had most distinguished herself by dauntless courage on the battlefields and by effective service in the military hospitals, the united voices of the soldiers and of all the army nurses would assign the honor to Anna Etheridge. In a poem to Miss Etheridge, it was predicted that history's pages would embalm the heroine's deeds in lines of fire. The medal was not awarded and the prophecy was not fulfilled: thousands of soldiers once shouted "Hurrah for Annie!"; but the name of Anna Etheridge was not echoed by a later generation.

Nurses, whose names once seemed imperishable as they resounded with an army's gratitude, are now forgotten. Dictionaries of American biography have neither room nor remembrance for Helen Louise Gilson, whose white kerchief over her dark hair brightened the river boats, fields of carnage, pestilence wards, and the Colored Hospital; Mary Morris Husband, the granddaughter of the Revolutionary patriot Robert Morris, who proved worthy of her ancestry; Elida Rumsey Fowle, rejected by Miss Dix as a nurse because of her youth, who stood on a pile of soldiers' knapsacks and sang her way into the hospitals; Margaret Elizabeth Breckinridge, one of the martyr-nurses; Bridget Divers, known as "Irish Biddy" to Sheridan's men, who slept on the ground like a common soldier, and was nurse, hospital steward, ward master, surgeon, chaplain, cook, seamstress, washerwoman, and monitor of the Michigan cavalry.

Oblivion's sponge should not erase the names of Almira Fales, who prepared lint and hospital stores for the soldiers of the Union (Dec. 1860)

months before the bombardment of Fort Sumter opened the Civil War; Cornelia Hancock, first woman at bloody Fredericksburg to care for the wounded, and one of the earliest at Gettysburg; Anna Maria Ross, of the Cooper Shop Hospital; Lydia Parrish; Isabella Fogg; Rebecca Usher; Annie Wittenmeyer; Mary Shelton; Henrietta Colt; Hattie Dada; Nellie Mitchell; Lizzie Aiken (Aunt Lizzie); Elizabeth Mendenhall; Amy Bradley; Harriet Dame; Almira Quimby; Rebecca Wiswell ("They said my bandages were the best"); Georgina Willets; Jerusha Small; Katherine Prescott Wormeley; Grandmother Newcomb of Illinois (a refrain of that name was once famous); Adaline Tyler; the four Woolsey sisters and their cousin Sarah. Where two thousand perform their duty with such faithfulness, it is not necessary to choose among them. Sketches are here given of one whose reputation became national, Cordelia Harvey; and of one who worked in a local field, Adelaide Smith.

CORDELIA HARVEY. Not one of the guests, who merrily threw handfuls of rice at the Kenosha schoolteachers, Louis Powell Harvey and Cordelia Adelaide Perrine, foresaw the destiny of the young couple. Wisconsin was then a frontier territory, not yet a state in the Union. Teaching school was an occupation more honorable than lucrative, and the young couple sought their fortune in Clinton Junction, where Harvey opened a country store. Then they moved to a little village in Rock County, where Harvey purchased a distillery, not for the purpose of producing liquor, but for the pleasure of tearing it down and building a flourmill on its site, while near by he erected a Congregational church. Harvey helped to frame the constitution of Wisconsin (admitted into the Union, 1848), and rapidly became the leading figure in its legislature. In the first year of the Civil War, the immensely popular Harvey was elected governor of the Badger State.

After the boys from Wisconsin had gone South, their private letters would sometimes find their way into print. A member of the first Wisconsin wrote (Nov. 12, 1861):

As yet we have done little fighting, but have lost a large number of men. They are dying daily in the camps and hospitals from pneumonia, dysentery, and camp diseases, caused by severe colds, exposure, and lack of proper food when ill. We have taken very heavy colds lying on our arms in line of battle, long frosty nights. For two days and nights there was a very severe storm, to which we were exposed all the time, wearing shoddy uniforms and pro-



tected only by shoddy blankets, and the result was a frightful amount of sickness. Our hospitals are so bad that the men fight against being sent to them. They will not go until they are compelled, and many brave it out and die in camp. I really believe they are more comfortable and better cared for in camp, with their comrades, than in hospital. The food is the same in both places, and the medical treatment the same when there is any. In the hospital the sick men lie on rotten straw; in the camp we provide clean hemlock or pine boughs, with the stems cut out, or husks, when we can jerk them from a secesh cornfield.

This anonymous lad from Wisconsin had the vision of a sanitary statesman, and the concluding portion of his letter could have been pasted, with profit, in the hats of certain military surgeons of the time:

In the hospital the nurses are convalescent soldiers, so nearly sick themselves that they ought to be in the wards, and from their very feebleness they are selfish and sometimes inhuman in their treatment of the patients. In the camp we stout hearty fellows take care of the sick—rough in our management, I doubt not, but we do not fail for lack of strength or interest. If we could be sure of being half-way well cared for when we get sick or wounded, it would take immensely from the horrors of army life. We need beds and bedding, hospital clothing and sick-diet, proper medicines, surgical instruments, and good nurses—and then a decent building or a good hospital tent for the accommodation of our sick. I suppose we shall have them when the government can get around to it, and in the meantime we try to be patient.

Governor Harvey was too conscientious an official to be content to read such suggestions in the executive mansion: he went South for a personal tour of inspection. While passing from boat to boat, by the misstep of an inch, he fell into the swift current of the Tennessee River and was drowned.

Gradually emerging from the shadows, Mrs. Harvey realized that her personal happiness was at an end. She was one of those women of sorrow who symbolize eternal widowhood. But the war was going on, and there was work to do. The new governor, Edward Salomon, appointed her sanitary agent for Wisconsin. She undertook her task in a befogged atmosphere, for not only the average military and medical official, but the men themselves regarded war as a business for men only. When a Wisconsin bride, who had followed her sergeant-husband to the front, succumbed to the prevalent typhoid fever, a soldier protested against the presence of all women in camp: "The camp of the soldier is no place for a woman either to live or die in. Patriotism and love for her kindred may

induce a woman to surrender the comforts and quiet of home for the privations and hardships of the camp; but it is no place for her, and in nine cases out of ten, she will be more an inconvenience than an advantage, either as a nurse or a laundress."

During the last three years of the war, Mrs. Harvey visited the general hospitals on the Mississippi, and all the regimental hospitals of Wisconsin troops from Keokuk down to Vicksburg, at the mouth of the Yazoo. The authorities, who attempted to obstruct her, might as well have tried to check the Mississippi in flood. The surgeon who said to her, "You had better stay away, the air is full of contagion, and contagion and sympathy do not go well together," did not understand the absurdity of this warning to one who was waiting for death. Mrs. Harvey had become an army nurse, and where danger was greatest, there was she most certain to be. In all seasons she roamed up and down the limitless river and its tributaries. The woman with the shattered heart brought good food and fresh flowers to the abode of pain, and thousands of the forgotten victims of war responded to the warming sunshine of her smile.

At the bend of the Mississippi known as Cape Girardeau, the remnants of the First Wisconsin Cavalry lay in cot-crowded sheds, perishing in the heat of August. Mrs. Harvey went there to alleviate their suffering, and received a profound shock. She knew these men, recalled them in their pride of youthful vigor, when, with shoulders erect and chins up, they paraded through the streets of Madison, to be reviewed by her husband as governor. Since that time they had marched through the deathtrap of Arkansas swamps, and those that returned were the phantoms of men, tottering wrecks, bedridden ghosts. Typhoid and camp fevers, and, that curse of the Southern swamps and the steaming rivers, chronic diarrhea struck them and took their young lives. She passed through the hospital-sheds, which she described as hot, unclean, infected. Soldiers reached out and touched her dress, seized and kissed her shawl, and clutched her hand to press it to their fevered cheeks. All eyes turned to her, all craved her attention: she was no longer the unwanted, she was the Wisconsin Angel.

Mrs. Harvey's military experience convinced her it was difficult for the soldiers of the North to recover in the hospitals of the South. She had already overstepped state lines, and had become a national figure as the friend of the Union soldier. She longed to take these men under



her cloak, remove them from the enervating miasma in which they sickened and died, and transport them to the tangy and bracing air of the northern climate in which they belonged. Others, including Governor Salomon of Wisconsin, had urged the establishment of military hospitals in the North, but without success. The government of the United States, backed by its medical department, declared the sick soldiers of the Union could be restored to health as readily in southern as in northern hospitals. It is usually beyond the power of a private individual to change the policy of a government, but one army nurse determined she would do it. Mrs. Harvey went to Washington and waited in the White House.

The chief executive took her hand, but the haggard face was cold, without its welcoming smile. It did not matter, for Mrs. Harvey had not come to hear polite speeches, or to tell her friends back home that she had seen the President of the United States. It was not the Lincoln of legend she saw before her, but the Lincoln of reality.

According to his contemporaries, here was the shrewd politician who had won the election by a narrow margin. Such leaders of public opinion as Horace Greeley and Henry Ward Beecher, who plotted against him, had many followers. There were those who objected to his origin: his grandmother was illegitimate, his father a drifter, and his mother an illiterate who could not sign her name. In those days, there was no halo around the head of Abraham Lincoln, but there were corns on his big feet, which explained why he liked to take off his shoes and keep his long legs on the green-baize desk, or drape them over any chair in his vicinity. Here was the Lincoln of moods and mistakes, the Lincoln who suffered from constipation for which he took little calomel pills and munched many apples, the Lincoln who told Rabelaisian stories and read Artemus Ward aloud in a cabinet meeting, his Gargantuan laughter answered by the frigid silence of his scandalized official family. There was no assurance that this Lincoln would decide in the right manner for Mrs. Harvey.

Mrs. Harvey came to Lincoln as suppliant and accuser: she pleaded for Northern hospitals, and she charged her government with responsibility for the graves along the Southern rivers. The problem had previously been discussed, and it had been settled that there was no need for Northern hospitals. Lincoln refused Mrs. Harvey's request; he told her he was sorry she had come, but he did not tell her to stay away. With-

out audience, and in a private office instead of a public arena, an extraordinary battle ensued. These antagonists were in deadly earnest, and eyes looked into eyes, searching each other to the depths. These stricken souls fought a duel in the name of mercy. Lincoln said to the woman: "You assume to know more than I do." She struggled to keep back her tears, as she admitted she had information of which he was ignorant. Lincoln continued: "You assume to know more than surgeons do." This counter-thrust was delivered as the blow of annihilation, but in a flash the woman saw her opportunity and she spoke:

"I come to you from no casual tour of inspection, passing rapidly through the general hospitals—with a cigar in my mouth, and a rattan in my hand, talking to the surgeons-in-charge of the price of cotton, and abusing the generals in our army for not knowing and performing their duty better, and finally coming into the open air, with a long-drawn breath as though they had just escaped suffocation, and complacently saying, You have a very fine hospital here, the boys seem to be doing very well, a little more attention to ventilation is perhaps desirable. It is not thus I have visited hospitals; but from early morning until late at night sometimes, I have visited the regimental and general hospitals on the Mississippi River from Quincy to Vicksburg, and I come to you from the cots of men who have died, who might have lived. . . ." She saw plainly the lines on Lincoln's brow, and the deep cloud upon his face.

Again Mrs. Harvey sat outside Lincoln's office. She had become a familiar fixture in that antechamber. There were those interminable meetings with a wrangling cabinet, most of whose members were convinced they ought to be in Lincoln's place. As Mrs. Harvey waited hour after hour, a feeling of despair bore her down, for she had a premonition she had lost. Yet she knew she would keep on waiting. Then the door opened, and there stood Lincoln, six feet four in height, the big-eared, bearded Lincoln with the honest, leathery face. She arose, and seeing how tired he was, offered to come another day. Lincoln made her sit down, and he told her the news. Mrs. Harvey, so brave in defeat, broke down in victory. She could not speak, she could only weep for joy. Lincoln noticed her agitation, knew she should be alone, and asked her to return the following morning.

The next day, late for her appointment, for she had been ill during



the night, Mrs. Harvey noted with astonishment a transfigured Lincoln: the homely face with the deep furrows had grown beautiful. From those melancholy eyes, shaded by the drooping eyelids, shone infinite kindness and justice and wisdom. Lincoln gave her a copy of the order for the government hospital in Wisconsin. He said to her, "This hospital I shall name for you," but at her request consented to name it for her husband. It was time for Mrs. Harvey to go, and Lincoln extended his hand. The little hand of Mrs. Harvey was lost in the strong, sinewed, oversized hand of the Rail Splitter, the hand which now guided the destiny of the nation. Wrote Mrs. Harvey, and no words but hers are worthy to record the scene: "I bowed my head and pressed my lips most reverently upon the sacred shield, even as I would upon my country's shrine. A silent prayer went up from my heart, God bless you, Abraham Lincoln! I heard him say good-bye, and I was gone. Thus ended the most interesting interview of my life, with one of the most remarkable men of the age."

Mrs. Harvey gave three hospitals to Wisconsin: the Harvey Hospital (Harvey U. S. Army General Hospital), established in Madison (Oct. 1863); a convalescent camp in Milwaukee; and the Swift Hospital in Prairie du Chien. Returning to the North, Mrs. Harvey brought with her a group of orphans. When wars are over, military hospitals are abandoned, so Mrs. Harvey converted the Harvey Hospital into the Wisconsin Soldiers Orphans Home. During the first year of its existence, Mrs. Harvey was its superintendent, and knew each of its three hundred children by name. Present-day Wisconsin, with its hundreds of hospitals and thousands of trained nurses, can ill afford to forget its pioneer army nurse who talked with Lincoln, and from whose compassionate words sprang hospitals for soldiers and a good home for the orphans of soldiers.

ADELAIDE SMITH. The army career of Adelaide Smith did not begin auspiciously. She sailed on a government transport, and became so seasick that the alarmed captain tried to arouse her by shouting that the dreaded *Alabama* was chasing them: it did no good, for seasickness abolishes the law of self-preservation, and Miss Smith was willing to die. Upon her arrival at the front, she approached a major and asked him to tell her, confidentially, if the surgeon in charge of Point of Rocks Hospital was a gentleman; only to learn a little later, while the color rose to the roots of her hair, that the major was the surgeon. During her first night in

camp, she could not sleep, for in the silence and darkness she heard the rumbling of wagons and tramping of Ben Butler's troops over pontoon-bridges. The following night, she was so distressed by a chorus of groans and cries that as early as allowable in the morning she confronted the surgeon to inquire if she could not do something for the suffering soldiers. As there were then no wounded men in camp, the puzzled surgeon asked her where she had heard the agonized sounds. When she indicated the direction, the surgeon replied, with a curious expression: "Miss Smith, you may try if you wish, but the cries came from the mules in the corral." That joke plagued Adelaide Smith wherever she went.

Despite errors of inexperience, Miss Smith was a witty and wholesome personality; she developed into one of the most competent and resourceful nurses in the service, and everyone called her "Colonel." Like Mother Bickerdyke, Miss Smith specialized in the private soldier. She got along well with officers, too, except when they interfered with her. The week in which forty-five healthy officers visited her in her tent was too much honor. One evening, three convivial doctors, after consuming considerable liquor, sought further entertainment in her society. Exhausted from the day's work, suppressing the luxury of yawning, she decided to tolerate them until the signal of lights out. At the sound of the welcome bugle, she remarked significantly, "It's taps, gentlemen!" Instead of taking the hint, they explained that taps were meant for the men, and did not concern such officers as themselves. The time for courtesy had passed. Miss Smith arose, and pointing to the tent-opening, exclaimed indignantly: "General Grant himself could not stay in my tent after taps."

It did not take Miss Smith long to realize that many of the farm lads in uniform were really suffering more from nostalgia than from fever, and that homesickness can produce the despair that leads to death. When apathetic patients persistently refused to eat, Miss Smith was frequently called upon to exercise her arts. "I have no appetite," was always a challenge to Miss Smith's ingenuity. On such occasions, after ascertaining the patient's favorite dish, she would appear with an attractive little tray, with silver cup and spoon and dainty doily, and the where-in-the-world-did-you-get-it delicacy. If the patient still protested, Miss Smith would start an argument, and taking advantage of an open-mouthed objection, slipped in a spoonful quickly followed by more spoonfuls. By her methods, she restored smiles and strength to numerous men; once she



poked through vast stores of supplies to locate a single four-by-three inch package of barley, with which she made the broth that saved a captain's life.

Miss Smith learned, from observation, the power of emotion upon prognosis. There lay in the same ward two convalescent officers, a young lieutenant and a major, each of whom had lost a leg in his country's defense; with the sensitiveness of cripples, each had written to his sweetheart, offering to release her from her promise, if such was her desire. Evidently, the lieutenant knew his woman, for he was pessimistic from the start, and her answer confirmed his suspicion. Indignation spreading through the ward like wildfire, there were hands which would have strangled the girl with pleasure, but that did not help the lieutenant. He could not recover from the crushing blow: he turned his face to the wall and died. Shrill fife and mourning drum played a funeral march, as his comrades carried him to a soldier's grave in the woods and fired the salute of farewell over his broken heart. The major's case had a different ending: when his fiancée received her letter of release, she bit her lip, packed her bag, undertook the dangerous journey to the hospital in Virginia, sat by the bedside of the radiant and rapidly-recovering bridegroom until he was able to travel north, and there were fragrant orange blossoms in Philadelphia.

Miss Smith had many experiences during her army life, and saw many of the leading figures of the period. She saw Lincoln, and loved that tall, gaunt form in the somber suit and the high hat; loved to see, in the gray eyes, the light that beautified like a halo the plain, sad face. She met Grant, with his inevitable cigar and superb, black horse; the General gave her the Grant Pass which made her an individual of importance, since it ordered all guards, pickets, steamboats and railroads to allow her to come and go at will. She met Dorothea Dix, whom she described as dignified; and Clara Barton, whom she found to be self-centered and uncooperative. She met numerous famous-to-be medical men, and particularly remembered a young doctor of the cavalry who often dashed by her row of tents on a spirited horse, his yellow-lined cape thrown over his shoulders, his long hair floating back. He was a Philadelphian, and his name was Silas Weir Mitchell.

Lee had surrendered to Grant, and the war was almost over. The bells of victory were already ringing throughout the land. The morning sun

rose over a peaceful hospital camp on the never-to-be-forgotten day (April 15, 1865). The silence was shattered by the galloping of a horse urged to its limit, and suddenly the hoofbeats stopped at Miss Smith's tent. A scratching on the canvas indicated a desire to attract attention. Hastily stepping outside, Miss Smith saw a wild-looking officer of the Tenth Colored Troops: without dismounting, he spoke the most terrible words that human ears had ever heard, saluted, spurred his foam-flecked horse, and disappeared. Miss Smith was the first in that hospital to know that the president had been assassinated. Prostrated and paralyzed, life seemed to stand still, and the world ceased to move . . . An army nurse has brief time for grief. The tents were filled with sick and wounded men, and they were crying because Abraham Lincoln was dead. Miss Smith parted the flaps of the tents and stood among the soldiers.

### NURSING IN THE SOUTH

A SOUTHERN DIARY. In Virginia, on the Potomac River, between the Mount Vernon home of Washington and the Arlington home of Robert E. Lee, lies Alexandria. Here lived, with her husband and children, Judith Brockenbrough McGuire, who kept a diary from the beginning to the end of the Civil War. The opening day of the diary (May 4, 1861) contains the entry:

The homes all look desolate; and yet this beautiful country is looking more peaceful, more lovely than ever, as if to rebuke the tumult of passion and the fanaticism of man. We are left lonely indeed; our children are all gone—the girls to Clarke, where they may be safer, and farther from the exciting scenes which may too soon surround us; and the boys, the dear, dear boys, to the camp to be drilled and prepared to meet any emergency. . . . I go from room to room, looking at first one thing and then another, so full of sad associations. The closed piano, the locked bookcase, the nicely-arranged tables, the formally-placed chairs, ottomans and sofas in the parlor! Oh for some one to put them out of order!

The diary of Mrs. McGuire contains a passionate entry on hats:

Almost every girl plaits her own hat, and that of her father, brother, and lover, if she has the bad taste to have a lover out of the army, which no girl of spirit would do unless he is incapacitated by sickness or wounds. But these hats are beautifully plaited of rye straw, and the ladies' hats are shaped so becomingly that though a Parisian milliner might pronounce them old fashioned and laugh them to scorn, yet our Confederate girls look fresh and



lovely in them, with their gentle countenances and bright enthusiastic eyes; and what do we care for Parisian style, particularly as it would have to come to us through Yankeeland? The blockade has taught our people their own resources; but I often think that when the great veil is removed, and reveals us to the world, we will, in some respects, be a precious set of antiques.

A country whose women must make their own hats is in no condition to win a war.

THE SOUTH INVADED. The Virginia physician, Elkanah Dulaney, had moved with his bride near Blountville, Tennessee: on his estate, which he named Medical Grove, he built (1799) the first brick house in the county. The years passed, and now the third generation of Dulaney's lived in the good brick house: Medical Grove gave seven officers to the Civil War. One autumn morning, the slaves were in the backyard slowly stewing thick apple butter, brownish and spicy. There were rumors in the air, and the daughters of the house decided to conceal their most valuable possessions: Evalina Dulaney found a hiding-place for the family silver; the younger sister Mary, bearing a greater treasure, ran into the garden with a tin box. At that moment a shell landed in the hay in the barn, and a shell fell among the flowers in the garden. The apple butter was flavored with gunpowder, and little Mary Dulaney dropped her tin box, as she raced back into the house. The village-battle of Blountville is not considered of sufficient importance to engage the attention of military analysts, but Mary Dulaney remembered it as the battle in which she did not have time to bury her love letters in her garden. This incident, seemingly trivial, is of profound significance: for the women of the South, who stayed at home, this was a war of invasion.

A Federal general, ravaging the Shenandoah Valley in the line of duty, reduced many houses to ashes: as a rule the men were absent, but the women watched their homes and heirlooms vanish in the flames. Henrietta Bedinger Lee, of Shepherdstown, West Virginia, wrote to Major-General David Hunter:

The house was built by my father, a Revolutionary soldier, who served the whole seven years for your independence. There was I born; there the sacred dead repose. Hyena-like, you have torn my heart to pieces! for all hallowed memories clustered around that homestead; and demon-like, you have done it without even the pretext of revenge, for I never saw or harmed you. Your name will stand on history's pages as the Hunter of weak women and innocent children; the Hunter to destroy defenceless villages and beauti-

ful homes; the Hunter with the relentless heart of a wild beast, the face of a fiend [in reality Hunter was a thoroughly honorable soldier and one of the handsomest men in the Union army], and the form of a man. Can I say God forgive you? No prayer can be offered for you! Were it possible for human lips to raise your name heavenward, angels would thrust the foul thing back again, and demons claim their own. The curse of thousands, the scorn of the manly and upright, and the hatred of the true and honorable, will follow you and yours through all time and brand your name infamy! infamy!

SOCIAL CONDITIONS. A martial spirit is not an effective substitute for machinery, and the most ardent patriotism cannot take the place of prosaic factories. According to a Southern writer: "Supplies of clothing of all kinds rapidly diminished as the war continued. Neatly trimmed thorns were often used in place of pins, and it was discovered that persimmon seeds made excellent buttons when thoroughly dried and pierced with the necessary holes for needle and thread, which, in their turn, became alarmingly scarce, so that the loss of a sewing needle became a household calamity." When the available supply of salt disappeared, so desperate were the attempts to obtain this necessity that sea water was boiled, and the dirt under smoke houses was dug up and washed. For the last three years of the war, Southern eyes seldom saw wheat. At the time that Lee was winning acclaim as the military genius of the Army of Northern Virginia, he was obliged "to borrow corn from his horse." The women of Georgia and the Carolinas followed the tracks of Sherman's cavalry, to gather any fodder and sweep up the stray grains that remained in the abandoned feeding-troughs.

DRUGS AS CONTRABAND. The Confederacy suffered ceaselessly from the lack of drugs. Every drop of pure chloroform, the magic fluid of the Confederate surgeon, had to pass through the tightest blockade ever known. The fields and forests of the South were turned into an experimental laboratory of materia medica: Jamestown weed took the place of belladonna; when no more colchicum was available, Indian poke was used instead; American hemlock was substituted for the pain-assuaging opium of the Orient; a requisition for digitalis, for the failing hearts of soldiers, was filled by wild cherry and bloodroot; and when the Southern physician asked for quinine, he frequently received willow bark or cotton-seed tea. Such was the demand for quinine that it became one of the prize items of the glamorous blockade-runners.



Feminine wiles were also utilized to smuggle quantities of this indispensable drug below Mason and Dixon's Line. A woman from New Orleans, whose trunk was being examined, wept as a doll came into view, claiming it was a gift for a crippled child. The Federal inspector looked at her tears and closed the trunk, whereupon a smiling woman from New Orleans went on her way with a doll which did not suffer from malaria, for it was stuffed with quinine. Women returning home after a visit to the North would freely expose their innocent baggage, but packages of quinine were neatly sewn in their petticoats. In those days, many a Southern hoop-skirt concealed an astonishing variety of contraband articles, including quinine. When the practice became known, the Federal authorities hired Yankee women to search the clothes of their sisters from the South, and examine the most intimate parts of the female anatomy: one should not be sensitive in wartime. The South echoed the cry of Mrs. McGuire: "Oh, how cruel it is that the Northern Government should have made medicines and the necessities of life to the sick and wounded, contraband articles!"

**MEDICAL UNPREPAREDNESS.** The twenty-three states of the North had a population of 22,000,000; the eleven states of the South had a population of 9,000,000, of which 3,500,000 were slaves. Considering the relative populations, it was natural for the soldiers of the North (2,789,893) to outnumber by far the soldiers of the South (600,000). According to the leading investigator of the diseases of the South, the Georgia-born, military hygienist, Joseph Jones: "One third of all the men actually engaged on the Confederate side were either killed outright on the field or died of disease and wounds." As there were more than three million cases of wounds and disease in the Confederate Army, it indicates that the average soldier of the Secession entered the hospital six times during the war. From the viewpoint of medicine, the South, even more markedly than the North, was entirely unprepared for war. Physicians of the Confederacy put on the double-breasted gray tunic with a star on the collar, but that did not make them military surgeons; patriotic women volunteered as nurses, although they were unorganized and inexperienced.

**HOMES AS HOSPITALS.** The women of the Confederacy opened their homes to their sick and wounded compatriots. Aristocratic households requested

the hospitals to send them disabled common soldiers, knowing that officers everywhere received special privileges. How pleasant convalescence could be in a private domicile is seen from the correspondence of a member of Hood's Texas Brigade, published long afterward as *A Soldier's Letters to Charming Nellie*:

Here in this old Virginia country home of genuine kindness and hospitality—where I take my place three times a day at a bountifully provided table; sleep on a feather bed, between clean, white sheets; hear the chatter and laughter of little children; and may, when I choose, listen to the low, sweet voices of refined and cultured women, or to the music evoked by skillful fingers from a melodious piano—there is little to remind me of the cruel war except a pair of crutches, my missing limb. . . .

WAYSIDE HOSPITALS. At Columbia, South Carolina, a group of disabled soldiers lay at the railway station, abandoned and forgotten by the authorities. As soon as the Young Ladies' Hospital Association learned of their plight, they transmuted that forlorn station into the first wayside hospital (March 1862), the forerunner of innumerable rest rooms and wayside homes along the railroads of the Confederacy. These little oases in the wearisome deserts of wartime journeys meant water and bandages and food and clothes and feminine smiles. Tired and depressed faces brightened at the sound of voices of high range, for these voices, which in happier times the men might have described as cackling, now fell with exceeding comfort upon the ear. In these wayside shelters the Confederate soldier, removed from the familiar landmarks of his life, again saw figures in homespun, with pots of coffee in their hands, saw them stirring hot soup in big bowls with ladles. It is stated how the women of South Carolina fulfilled their mission: "With pitchers of buttermilk and bottles of whiskey they would go through the cars, and if sick soldiers were on board they ministered to their wants."

HOSPITAL MATRONS. Daughter of an eminent father, wife of a distinguished husband, Louisa Susanna Cheves McCord (1810-79) was the gracious and cultured mistress of the Lang Syne plantation of South Carolina. She lived in a world of dreams, and had issued a volume of gentle poetry entitled *My Dreams*. The South was the center of creation, and never would God destroy the security of her class, which rested on slavery and cotton. "Christian slavery," wrote this good woman, "in its full development, free



from the fretting annoyance and galling bitterness of abolition interference, is the brightest sunbeam which Omniscience has destined for the negro's existence." The Civil War rudely dislocated her way of life, taking away her comforts and her son and her dreams. The inspiration of the Soldier's Relief Association, and president of the Lady's Clothing Association, she devoted herself to the sons of others: as matron of the military hospital in South Carolina College, she provided food and clothing from her own funds, supervised the younger attendants, nursed the sick, read and wrote the correspondence of the wounded, cheered the convalescent, and held the hand of the departing.

A leading nursing apostle of the South was Sallie Chapman Gordon Law (1805-94), of Virginia descent and North Carolina birth, sponsor of the Southern Mothers Hospital, smuggler of quinine and morphine for the sick and wounded men in gray, open-handed distributor of vast quantities of food, blankets, socks, and underwear; her devotion to the soldiers was rewarded by the title of Mother of the Confederacy.

Juliet Ann Opie Gordon Hopkins (1818-90), born in Jefferson County, Virginia, sold most of her land, which enabled her to give half a million dollars to Dixie; at Bull Run her services were declared to be more useful to the Southern army than a fresh brigade; at Seven Pines, while attending disabled men on the battlefield amid driving rain and exploding shells, she received the wound which caused her to limp for the rest of her life; her important work as matron of the Alabama hospitals, which she conducted with such efficiency that sick soldiers petitioned to be transferred there, was recognized by the state, which issued currency bearing her portrait.

MOTHERS OF REGIMENTS. Betsy Sullivan followed her husband John to war; like the men, she marched through forests and over mountains with a knapsack on her back, which served her as a pillow by night. She was nurse, cook, seamstress, and laundress to a regiment: no dish was too difficult to prepare for a sick soldier; no pus-hardened, blood-drenched uniform too filthy to wash. In the fury of Shiloh and its frenzied aftermath at Corinth, she covered the battlefields, her arms loaded with bandages, her shoulders bending beneath canteens of water: she bound up the wounds of the fallen, she gave drink to parched lips. At various times, when urged to take a long-overdue furlough, she had only one

reply: "No, my boys need me, I must go to them." Her boys, in return, had only one name for her: Mother to the First Tennessee Regiment.

A Kentucky regiment, known as the "Orphan Brigade" because it lost so many of its commanders, acquired a mother when Bettie Taylor Philips enlisted with her husband. In the years that passed, her slender form became a constant figure in camp, on long marches, by many cots of pain, and amid the fire of battle. Despite her own frail health, she endured to the end. She was in Georgia with Jefferson Davis when he divided his camp outfit among his followers, and the leader of the Lost Cause gave to the faithful nurse his mess cup. It was said of her that she loved each man in the Fourth Kentucky Regiment as if bound to him by ties of blood, and by all she was revered as the Mother of the Orphan Brigade.

SALLY LOUISA TOMPKINS. A well-born daughter of Virginia, Sally Louisa Tompkins (1833-1916), described as demure, diminutive, dignified, established in Richmond, on the corner of Main and Third streets, a private hospital which she maintained entirely at her own expense. She was the head of the hospital, its purveyor and cashier, supervisor of the medical staff, and chief nurse. An order placing all private hospitals under government control did not meet with the approval of Miss Tompkins, who brought her extraordinary records to Jefferson Davis: the president of the Confederate States of America solved the problem by appointing her a captain. The only woman who held a commission in the army of the Confederacy, she accepted the rank as she needed authority to requisition supplies, but she refused to be placed on the pay-roll. The reputation of her independent institution caused the most serious and critical cases to be consigned to it, yet the mortality was low and the number of cases returned to combat remarkably high: according to the register of the hospital, there were only seventy-three deaths among its 1,333 patients. Captain Sally was an unforgettable figure, as day and night, with a Bible in her hand and a medicine-case strapped to her side, she moved from bed to bed in the hospital.

ELLA KING NEWSOM. A widow from Arkansas, Ella King Newsom, after intensive training under the medical staff and Sisters of Mercy in Memphis City Hospital, demonstrated unusual executive ability in the



organization of military hospitals. It was her choice to know suffering as only a nurse can know it, to devote her wealth and energy, her talents and her tears, to the masculine wreckage which forms the backwash of every war. She followed in the footsteps of the retreating Confederacy, erecting and administering hospitals noted for their excellence: one was known as The Soldiers Paradise, and its superintendent was called the Florence Nightingale of the Southern Army. She left her beneficent mark in the Newsom hospitals of Kentucky, Tennessee, Georgia, Mississippi, and Virginia. In one of her letters is a paragraph about an unknown soldier, which deserves to be etched on humanity's scroll as an epitaph alike of the soldier and his nurse:

I remember a soldier from the enemy's ranks who was a prisoner with many others. He was a splendid-looking man with great brown eyes. His name was never given to me. I shall never forget the agony of that suffering countenance as he tossed his head from side to side to try to breathe. When he learned that we were about to leave on a retreat, he begged so hard to be taken along that I persuaded some of the nurses and soldiers to take up his bunk and carry it to the car platform and, if it were possible, I promised him he should be put on the train with our wounded. Carrie, my maid, walked beside the bunk, fanning him every step of the way; yet we pleaded but vainly to have him go with our wounded. The Yankees were then shelling the town and I had to tell him that his friends would soon take charge of him and see that he was well cared for. Carrie and I bade him farewell, at the same time placing a fan in his hand; then we boarded the train—I never heard of or saw him again.

DIXIE NURSES. Matrons and nurses of the Confederacy include Jane Stanard and Martha Morris, active in the Fourth Street Hospital of Richmond; Emily Mason, matron of the Cary Street Hospital in the capital; the youthful Mary Pettigrew, one of the forty-five matrons of the immense Chimborazo Hospital, with its several score of wooden buildings and hundred Sibley tents; Annie Johns, who remained in Danville, Virginia, to nurse the wounded soldiers of the enemy; Kate Mason Rowland, who kept a diary which has become an historical document; Phoebe Yates Pember, author of valuable reminiscences (*A Southern Woman's Story*); and Belle Boyd (1843-1900), irresistible when flinging her shawl over the shoulders of a ragged Confederate, a devoted nurse, but more famous as a spy, charmer of men, and, subsequently, actress. Her direct opposite was the publicity-shy Lenie Russell, who sat immovable all night on the

battlefield of Winchester, holding in her arms a soldier too desperately wounded to be carried to the hospital, whose critical sleep could not be broken until dawn. By her ordeal, she saved the life of the beardless boy, Randolph Ridgely of Maryland, but the heroic nurse would not permit her name to be published: when the artist, Oregon Wilson, portrayed the incident, he called the picture simply, "Woman's Devotion."

A JOURNAL OF HOSPITAL LIFE. No woman of the Confederacy was hotter for the cause, or angrier toward Yankeeland, than the Scotch-born Kate Cumming; none was more efficient as a hospital matron, and no contemporary document was more valuable than her report, *A Journal of Hospital Life* (Louisville, 1866). In answer to Southern protests against nursing by modest maidens, Kate Cumming wrote:

There is a good deal of trouble about the ladies in some of the hospitals of this department. Our friends here have advised us to go home, as they say it is not considered respectable to go into one. I must confess, from all I had heard and seen, for awhile I wavered about the propriety of it; but when I remembered the suffering I had witnessed, and the relief I had given, my mind was made up to go into one if allowed to do so. . . . It seems strange that the aristocratic women of Great Britain have done with honor what is a disgrace for their sisters on this side of the Atlantic to do. This is not the first time I have heard these remarks. Not respectable! And who had made it so? If the Christian, high-toned, and educated women of our land shirk their duty, why others have to do it for them. It is useless to say the surgeons will not allow us; we have our rights, and if asserted properly will get them. This is our right, and ours alone.

Kate Cumming exhorts the women of the Confederacy to nurse their soldiers:

Women of the South, let us remember that our fathers, husbands, brothers, and sons are giving up all that mortals can for us; that they are exposed hourly to the deadly missiles of the enemy; the fatigues of hard marching, through burning suns, frost and sleet; pressed by hunger and thirst; subject to diseases of all kinds from exposure; and last, though by no means least, the evil influences that are common in a large army. Are we aware of all this, and unwilling to nurse these brave heroes who are suffering so much for us? What, in the name of common sense, are we to do? Sit calmly down, knowing that there is many a parched lip which would bless us for a drop of water, and many a wound to be bound up? These things are not to be done, because it is not considered respectable! Heaven help the future of our country, for nothing but God's special aid can save any country where such doctrines are inculcated.



The diarist continues with mounting indignation:

Women of the South, let us remember we have a foe as relentless as Tamerlane or Attila, who, if we are to believe his own threats, has resolved to lay our towns in ashes, lay waste our fields, and make our fair land a blackened mass of ruins if we will not submit to his domination; and, unless every man and woman in the South do their duty, he will succeed, even though we had a president gifted with the wisdom of Solomon, and generals endowed with the genius of Frederick or Napoleon. I know there are hundreds of our women who look on this subject in the proper light, having household duties to attend to, which they cannot leave; but have we not thousands who, at this moment, do not know what to do to pass the time that is hanging heavily on their hands? I mean the young: the old are not able for the work. If it will hurt a young girl to do what, in all ages, has been the special duty of women—to relieve the suffering—it is high time the youth of our land were kept from the camp and field. If one is a disgrace, so is the other.

Later on in the diary, Kate Cumming becomes sufficiently unladylike to admit she is thoroughly disgusted:

Miss W. received a letter from a cousin, a surgeon in the army, entreating her to leave the hospital, saying that is no place for a refined, modest young lady. I have perhaps made a mistake as regards the meaning of the word modesty. I am thoroughly disgusted with this kind of talk. When will our people cease to look on the surface of things? At this rate, never! If the scenes we are daily witnessing will not serve to cure this miserable weakness, nothing will. There is scarcely a day passes that I do not hear some derogatory remarks about the ladies who are in the hospitals, until I think, if there is any credit due them at all, it is for the moral courage they have in braving public opinion. A very nice lady, a member of the Methodist Church, told me that she would go into the hospital if she had in it a brother, a surgeon. I wonder if the Sisters of Charity have brothers, surgeons, in the hospitals where they go? It seems strange that they can do with honor what is wrong for other Christian women to do.

THE LOST CAUSE. As the war drew to a close, adversity encircled Dixie Land. When the city of Richmond, the shrine of the South, the capital of the Confederacy, and the goal of the Army of the Potomac, was overwhelmed, Sara Agnes Pryor remembered: "I found myself weeping, not for my changed life, nor for my own sorrows, but for the dear city, the dear, doomed city, so loved! so loved!" The South, after the surrender at Appomattox, was truly "The Land Where We Were Dreaming": this sadly beautiful lyric, written far from home by the poet of the Shenandoah Valley, was the mirror of the South after the war. To the women of the South, so confident of victory and so dazed by defeat,

fell a hallowed work among the willows of sorrow: as described by the diarist, Judith Brockenbrough McGuire, theirs was the task "of treasuring up the buttons, and the stars, and the dear gray coats, faded and worn as they are, with the soiled and tattered banner, which had no dishonoring blot, the untarnished sword, and other arms, though defeated, still crowned with glory."

The South had another crown of glory, though it did not realize it at the time. The chivalrous and sex-conscious South, feudal and prudish, wishing to spare its maidens the knowledge of the backwash of war, preferred male nurses: convalescent soldiers attending their comrades. Delicately reared plantation-daughters, carefully guarded from reality, were not permitted to plunge into the vulgarities of military nursing. Some women did not accept the injunction, they went to the hospitals because it was too terrible to stay away, and they fulfilled their mission because they could not do otherwise. A British tourist in Dixie (Catherine Cooper Hopley) declared: "Heaven only knows what the soldiers of the South would have done without the exertions of the women in their behalf." Here is one of those instances in which the foreigner sees the situation more clearly than the native. The farther this period recedes into history, the firmer must the garlands of Southern gratitude rest on the homemade straw hats of the women who broke the taboo to nurse the Confederate soldier.

### NUNS ON BATTLEFIELDS

CATHOLIC SISTERHOODS. The Catholic sisterhoods of America, serving as nurses in the military hospitals and on the battlefields of the Civil War, included: Sisters of Mercy, Chicago, Illinois; Sisters of Saint Dominic, Springfield, Illinois; Sisters of the Holy Cross, Notre Dame, Indiana; Sisters of Providence, St. Mary-of-the-Woods, Indiana; Sisters of Charity, Nazareth, Kentucky; Sisters of Saint Dominic, Springfield, Kentucky; Sisters of Our Lady of Mount Carmel, New Orleans, Louisiana; Sisters of Mercy, Baltimore, Maryland; Sisters of Charity of Saint Vincent de Paul, Emmitsburg, Maryland; Sisters of Mercy, Vicksburg, Mississippi; Sisters of Charity, New York, New York; Sisters of Mercy, New York, New York; Sisters of Charity, Cincinnati, Ohio; Sisters of Mercy, Cincinnati, Ohio; Sisters of the Poor of Saint Francis, Cincinnati, Ohio;



Sisters of Saint Joseph, Philadelphia, Pennsylvania; Sisters of Mercy, Pittsburgh, Pennsylvania; Sisters of Our Lady of Mercy, Charleston, South Carolina; Sisters of Saint Dominic, Memphis, Tennessee; Sisters of Saint Ursula of Galveston, Texas; Sisters of Saint Joseph of Wheeling, West Virginia.

**NUNS AS NURSES.** The third medical volume of the *Medical and Surgical History of the War of the Rebellion*, issued by the Government Printing Office at Washington, contains the passage:

Female nurses were borne on the rolls of many of the hospitals. At one time, in the West's Building, Baltimore, Md., 20 of 70 nurses were women; at Stewart's Mansion 15 of 70, and at Bedloe's Island, N. Y. Harbor, 10 of 70. These were frequently Sisters of Charity—40 served at Satterlee, 16 at Point Lookout and 15 at Cliffburne. According to the testimony of all the medical officers who have referred to this point their best service was rendered in connection with extra diets, the linen-room and laundry. Male help was preferred in the wards, save in special cases of prostration and suffering where particular care was needful in the administration of dietetic or remedial agents. Sometimes, where no female aid was employed, female aid societies volunteered their services in superintending the extra diets and taking charge of the contribution room. At Turner's Lane and South Street Hospitals, Philadelphia, Pa., a lady volunteer superintended the linen-room and extra diets. Another volunteer supervised the regularly appointed female nurses and had charge of the extra diets at Chester, Pa.

This official paragraph, proper according to army regulations, omits much.

**NUNS IN BARRACKS.** John Shaw Billings, then a raw assistant surgeon in his early twenties, but already possessing the critical faculty which later made him one of the most important figures in American medicine, managed to drop a laurel leaf on the white cornettes in his description of Cliffburne Hospital of Washington:

The barracks had been previously occupied by the 5th U. S. Cavalry. I found the buildings and grounds in an extremely filthy and dilapidated condition—no drainage whatever, no sinks, no water within half a mile. Five buildings, the old barracks, were first fitted up, additional doors and windows being inserted and the system of ridge ventilation adopted. Apertures were also cut in the sides of the buildings near the floor, and every part well white-washed inside and out. A thorough system of drainage was instituted and three wells dug and fitted with large wooden pumps. These, however, are insufficient, and one team is in constant use bringing water from a distance.

The report of Billings continues:

A new building for kitchen and mess-room was built, 200 feet in length and 15 in width, and Ball's patent range placed therein, capable, as found by experience, of cooking easily for 1,000 persons. Wooden privies were constructed, eighteen in number, and so light as to be readily removed to new trenches when necessary. Fifteen hundred loads of offal were cleared from the grounds and vicinity of the buildings, and 800 loads of gravel advantageously disposed in various situations. One hundred and five hospital tents were pitched, framed and floored, and two additional buildings fitted up, making the number of beds in the hospital one thousand. A bath- and wash-room 50 feet in length was also built, and four tubs are in constant use. Three washing-machines are used in the wash-room—and both hot and cold water freely supplied. An apothecary shop, store-room, clothing-rooms, knapsack-room, dead-house, guard-house, stable, etc., were also fitted up. Fifteen Sisters of Charity are employed as nurses; they prepare all extra articles of diet. Of their services and conduct I can speak only in terms of the highest praise.

**SISTERS AND SOLDIERS.** In the war of brother against brother, a Union commander arrived at Thibodaus on Bayou Lafourche, near New Orleans, Louisiana. Hearing the deep notes of a bell, and believing the people in the vicinity were thus being warned of the presence of his men, the general ordered a squad to investigate. The soldiers entered a garden, from whose companile the convent bell was ringing. A young nun, her hand still on the rope, calmly faced the intruders. In response to their question, she replied "Do you not know the sound of the Angelus? This is the call to prayer." The Irish-born Mother Saint Patrick Heffernan, overhearing the conversation, smiled in contentment at the answer of the child, known in religion as Sister Saint Hyacinth Judice. In Europe, generations of peasants had bowed their heads as the sacred bell rang three times, three times, three times, nine times, but large sections of the American population had never heard the voice of the Angelus.

Five Sisters of Charity, traveling through Georgia (1863) to nurse in a military hospital, stopped at a wayside station. The natives stared at them without reserve, and wondered audibly what they were. At one of the towns, not knowing where to obtain shelter, the Sisters went to the home of the Catholic priest; he had never seen a Sister of Charity, and feared they were impostors. Since a leader of their own faith was unfamiliar with their gray garb and white bonnets, it is not surprising if some of the soldiers were hostile. In the Marine Hospital



of Virginia was confined a wounded combatant who not only refused to take his medicine from the Sisters but struck at them as they passed. When it finally dawned upon him that his behavior did not have the slightest effect on their attitude toward him, his curiosity overcame his resentment, and he asked: "What are you?" "I am a Sister of Charity." "Where is your husband?" "I have none, and I am glad I have not." Infuriated at this answer, he demanded: "Why are you glad?" His nurse replied: "Because if I had, I would be employed in his affairs, and could not be here waiting on you." Her enemy turned his face away, humbled, subdued, and utterly vanquished. Upon his recovery, it was noticed he was an ardent champion of the Sisters of Charity.

Nine Sisters of Mercy from New York, bound for the government hospital of Beaufort, North Carolina, sailed on a boat whose only other passengers were five hundred cavalry horses. They arrived in the midst of a heavy rainstorm, passing a wrecked piano on the shore, and walked in single file from the wharf to the hospital, which was built so near the sea that at high tide the waves broke over its timber props. The patients, looking out of the windows, seeing these women in black, thought they were widows seeking the bodies of their dead husbands. The soldiers had never met a Sister of Mercy, and their presence awoke vague childhood memories of warnings against the dark deeds of the emissaries of the Pope. One of the hospital stewards could not sleep, as he suspected the Sisters of Mercy had come to poison the patients. The Sisters could not sleep either, because of the filthiness of the premises; there was neither lamp nor candle in the hospital, and its solitary broom, supposed to be wielded by a saucy little Chloe, was safely hidden from sight. The Sisters of Mercy transformed that hospital, working against such adverse conditions that several of them sickened, and two of them died at their posts.

A Confederate recruit, under fire for the first time during the battle of Galveston, was shot in the face. He lay on the ground until the gathering dawn, and then cautiously raised his head to look down the line. To his amazement, he saw women walking back and forth. He exclaimed to the soldier lying beside him: "My God! Look at those women. What are they doing down there? They'll get killed." His more experienced companion said: "Oh, those are the Sisters. They are looking for the wounded. They are not afraid of anything." The Confederate youngster entered the convent which the Sisters of Saint Ursula had turned into

a hospital. During his convalescence he learned that the Sisters did not know which of their patients were Boys-in-Blue and which were Boys-in-Gray; whether Catholic or Hebrew or Protestant or Mohammedan, they did not ask; in the motley army of the wounded, they nursed with equal devotion the American and the European, the Negro, and the stray Indian. The Sisters demonstrated the applied democracy of military nursing.

THREE MARYS. Mary Lucy Dosh, a Sister of Charity of Nazareth, walked unfalteringly in an atmosphere of contagion. The young girl nursed the most dangerous cases, and the soldiers called her the Angel Guardian of the Fever Ward. There was a Christmas Eve when her hand decorated the hospital with the evergreens of Kentucky. Those branches from the forest served as her funeral wreath, for she did not heed her infection, and after Christmas another Sister appeared in the fever ward. Mary Consolata, of the Motherhouse at Emmitsburg, worked with such zeal on hospital ships and in military encampments that the doctors could not understand her unwearied endurance, but they understood her fatal malady: "Typhoid contracted on the transport." Mary Fidelis (Bridget Lawler), a Sister of the Holy Cross of Notre Dame, nursed for six months at Mound City Hospital without ever seeing the façade of the building. She never did get to see the outside, for she perished within the walls. As she lay dead on her hospital cot, the Ohio River rose in flood, reaching her room. So they placed the coffin in a little boat, and rowed the fallen nurse over the waters into the woods. These were among the Marys who never came back from the war.

EMMITSBURG AND GETTYSBURG. The Sisters of Charity of Saint Vincent de Paul had been founded in America by Elizabeth Ann Bayley Seton (1809): a log-house on the hillside was the Motherhouse at Emmitsburg in Maryland on the Pennsylvania boundary. For many years there was peace in the valley, the silence of the forest unbroken save for the voice of the wind through the trees and the call of the night birds. The solitude of the Nuns of the White Cornette was shattered by the Civil War: Gettysburg is ten miles from Emmitsburg. The Motherhouse trembled in the vibrations of the cannonading. The clover and the wild flowers lay trampled beneath the contending armies, and the flower of our



manhood, North and South, was cut down in the most fatal battle on American soil.

Like the sun that shines after a storm, the Nuns of the White Cornette were immediately seen at Gettysburg, coming across the rain-drenched, mud-clogged, blood-soaked fields. Burning houses, overturned wagons, fallen trees, abandoned swords, voiceless guns, thousands of lost hats, cadavers of splendid horses who would never smell powder again, mounds of pain, and barricades of the silent dead, impeded their progress, but they made their way. They gave drink to parched lips, administered medicines, bound up flowing wounds, and soothed the last moments of the dying. A never-tiring young nun, Petronilla Breen, sat on the stump of a tree, preparing compress after compress. There were not enough bandages for all the injured, and unhesitatingly the Sisters of Charity tore strips from their own garments. To the wounded at Gettysburg, it was holy fabric from angels in hell.

**SATTERLEE HOSPITAL.** At the commencement of the Civil War, troops began to be raised by regiments, and regulations provided hospital-tent accommodation in proportion to the number of men on the regimental rolls. The authorities knew nothing about large military hospitals, and our volunteer medical officers were strangers in any military hospital, large or small. The first military hospital which many of our medical officers entered was when they stepped within the canvas of the hospital-tent of their newly outfitted regiment. Experience demonstrated that a collection of these regimental tent wards could be consolidated into a single establishment for a division or corps, and that such an institution, detached from its limiting regimental connections, necessarily became a large military hospital. Among these general hospitals was the Satterlee Hospital, west of West Philadelphia, whose grounds covered upward of twelve acres, enclosed by a gigantic picket fence.

The surgeon in charge of Satterlee Hospital was there by the accident of war, for military medicine was only an interlude in the career of Isaac Israel Hayes (1832-81). As a medical student at the University of Pennsylvania, Hayes had been fascinated by the pattern of life of a former student of his alma mater, the physician-explorer Elisha Kent Kane. Since his youthful days, Kane's heart had been crippled by rheumatic fever, but no stouter heart beat on earth. In the year of his graduation

(1853), Hayes joined the Kane expedition to the Arctic as surgeon and naturalist: the meeting of Kane and Hayes was a union of kindred souls. Hayes knew temperature so far below freezing-point that snow upon the lips cuts like a caustic, but he also knew the thrill of a pioneer who helped to pave the way to the North Pole. In the course of his Arctic adventures, Hayes crossed the Kane Basin, became the first white man to set foot on Grinnell Land, and the first to explore the shore of Ellesmere Island north of Cape Frazer. Returning to the United States between expeditions (Oct. 1861), he found his country at war, and, at once, offered his schooner and his services to the government. As surgical head of the Satterlee, Hayes performed his duties with a competence that brought him praise and promotion; uncomplainingly he waded through seas of human blood, while dreaming of polar seas beyond which lay land unknown to civilized man.

Hayes, who was thirty when appointed surgeon of the Satterlee, wrote: "I was fortunate in being able to engage, as directed when the hospital was first opened, forty Sisters of Charity, whose labors have been unceasing and valuable." Upon their arrival at the Satterlee, the Sisters could not find the entrance to the vast hospital; puzzled workmen on the grounds mistook them for members of a flying artillery; not an American soldier knew who they were; only a convalescent Frenchman recognized them by their white-winged cowls. The Sisters of Charity soon made themselves indispensable to the patients. When smallpox occurred and the ambulance came to take these cases away, men, who had been brave in battle, broke down and begged not to be removed from their nurses. It was characteristic of the Sisters that all volunteered to remain with the smallpox victims. Hayes did not exaggerate when he said the Sisters labored unceasingly: after the second battle of Bull Run, wagons filled with hundreds of wounded soldiers rolled through the gateways of Satterlee Hospital; after Gettysburg, they came by thousands.

**SISTER GONZAGA.** Among the Sisters at the Satterlee was Sister Gonzaga (1812-97). Born in Baltimore as Mary Agnes Grace, baptized in St. Patrick's Church, she early decided to retire from the world. At eleven, she was a diligent student at St. Joseph's Academy of Emmitsburg; at fifteen, she was received into the community of Sisters of Charity of St. Vincent de Paul; at eighteen, she made her holy vows and was sent to



St. Joseph's Orphan Asylum in Philadelphia, which she left from time to time for other work, but to which she always returned. She was fifty when she took her place in Satterlee Hospital. She became the spirit of the hospital. Long after taps, the familiar face, under a white hood, was barely visible by the dim gaslight; it required keen ears to hear those silent footsteps; yet everyone knew when Sister Gonzaga passed by. In the immensity of Satterlee, irrespective of race or creed, Sister Gonzaga was mother to fifty thousand soldiers.

SISTER ANTHONY. Born in Limerick, Ireland, as Mary O'Connell, Sister Anthony (1814-97) was brought in early childhood to the United States. After serving her novitiate at Emmitsburg, becoming a Sister of Charity of St. Vincent de Paul, she was transferred to the north bank of the Ohio. Here Mother Seton's daughters had opened Cincinnati's first orphan asylum; increasing their activities, they converted a former boarding school for young ladies, in which Harriet Beecher Stowe had been a teacher, into their first hospital in that region, St. John's Hotel for Invalids (1852). Sister Anthony was placed in charge of this institution, a vital part of the medical life of Ohio.

A graduate of the Medical College of Ohio, who had received his degree, as was customary in those days, by enrolling for two courses of five months of lectures—the instruction of the second year being identical with that of the first—came for his internship to the grassy slopes of the tree-shaded St. John's Hotel for Invalids. The Sisters noticed his earnest ways, and the peculiar melancholy in the blueness of his eyes, and as his first name happened to be John, they called him St. John of the Hospital. He and Sister Anthony became lifelong friends. He was known in his maturity to the medical world as John Shaw Billings. The leading surgeon of St. John's Hotel for Invalids was young Billings' teacher, George Curtis Blackman.

Some years before the Civil War, a heavy-set, dark-complexioned man, entered a farmhouse in Covington, Kentucky, and looked at a patient who had undergone several operations without relief; this surgeon removed a twenty-two-pound ovarian cyst, tipped his hat to the lady, and left. It is not surprising to hear that forty years later the lady was still singing his praises as the greatest of surgeons. Even his more critical colleagues regarded George Curtis Blackman as the most gifted surgeon

of the Ohio Valley, though others complained, and with equal justice, that Blackman quarreled with everybody, including God Almighty. He was indeed a man of variable moods: so tenderhearted that, during the vivisection of a pigeon, he fainted; so irascible that, catching an attendant on a transport demanding a tip from a soldier, he kicked the offender the entire length of the deck. Blackman's most magnificent hour was the aftermath of the battle of Shiloh. A surgical titan, knife in hand, he dominated the hospital boats, saving life, throwing amputated legs and arms into the river, operating without pause, operating without food, operating without sleep.

Like a shadow at Blackman's side, not leaving him by day, nor departing from him by night, helping him in the most painful and revolting tasks, stood Sister Anthony.

Long after the war, Sister Anthony recalled her baptism under fire:

At Shiloh we ministered to the men on board what were popularly known as floating hospitals. We were often obliged to move farther up the river, being unable to bear the terrific stench from the bodies of the dead on the battlefield. This was bad enough, but what we endured on the field of battle while gathering up the wounded is simply beyond description. At one time there were 700 of the poor soldiers crowded in one boat. Many were sent to our hospital in Cincinnati. Others were so far restored to health as to return to the scene of war. Many died good, holy deaths. The soldiers were remarkably kind to one another. They went around the battlefield giving what assistance they could, putting the wounded in comfortable places, administering cordials, etc., until such time as the nurses could attend to the wounded and sick. Day often dawned on us only to renew the work of the preceding day, without a moment's rest. Often the decks of the vessels resembled a slaughter house, filled as they were with the dead and dying.

**THE OLD SISTERS.** The postwar careers of Sister Gonzaga and Sister Anthony had interesting similarities. Sister Gonzaga returned to Philadelphia, once more to take charge of St. Joseph's Orphan Asylum. When she was considered too old for this work, she was retired to Emmitsburg, but "Heaven was stormed by fervent prayers for the return of the Mother of the Poor." As in a triumphal procession, she came home to her asylum, and as Emeritus Mother was never again parted from her beloved orphans. Sister Anthony resumed her labors in Cincinnati, on a wider basis than before the war. Two citizens purchased the United States Marine Hospital, and gave it to Sister Anthony for the welfare of the community: St. John's Hotel for Invalids thus developed into the flourishing Good Samari-



tan Hospital. Another time, her request was the sesame that again opened the vaults of wealth, and she, who had no purse of her own, was enabled to establish the Foundling Asylum of Norwood for unmarried mothers and their fatherless infants.

Sister Gonzaga and Sister Anthony passed away in the same year: each spent her declining days in the asylum of the disinherited with which her name had been so long and intimately associated. As Sister Gonzaga lay in her coffin, crowds of men and women looked at her dead face, and kissed the rosary within her still hands. The widespread tributes of esteem and affection which greeted the announcement of Sister Anthony's death showed that the venerable nurse had been taken into the nation's heart. These two old women, Sister Gonzaga and Sister Anthony, were the most famous of the Sisters of Charity who had served as war nurses.

Thirty years after Sister Gonzaga was carried within the shadows of Old Saint Mary's Church in Philadelphia, and Sister Anthony was laid to rest at Mount Saint Joseph, overlooking the Ohio River and the Kentucky hills, the war seemed far past. Of the more than two hundred soldier-sisters who had gone forth from the community of Emmitsburg, only two were among the living. In their twenties when the war began, they were now in their nineties: Sister Mary Ambrosia McDevitt and Sister Mary David Salamon. Of foreign birth or parentage in many cases, wearing a garb that was strange to Protestant soldiery, the unblemished record and unwearied devotion of these nuns of the battlefield conquered all opposition. They were of special value to the Confederacy, for the Catholic sisterhoods were the only women in the South who had any experience in nursing-technique and hospital management. Their soothing voices, their gentle fearlessness, their equal attention to all the suffering without regard to race, creed, or color, endeared them alike to the North and to the South.

CONCLUSION. There can be no dissenting opinion to the testimony of Mary Livermore: "If I ever felt any prejudice against Sisters as nurses, my experience with them during the war would have dissipated it entirely. The world has known no nobler and more heroic women than those found in the ranks of the Catholic sisterhoods." The Church which lit the fires of the Inquisition; persecuted science, and immured human

reason; broke the spirit of man on the wheel, and tortured generations on the rack; massacred whole populations, and fomented wars of religion; and in the historic conflict between liberty and despotism, stood on the side of darkness—this same Church scattered the seeds of charity and mercy over the earth, raised shelters for the weary and built hospitals for the afflicted, brought hope to the abandoned and gave faith to the despairing, nursed the sick and comforted the dying, and held within its ample folds the women who went to the war and who earned, from a stricken nation, the honored title: Angels of the Battlefield.



## X

### A Shaker Bonnet in the Civil War



Mary Ann Ball was a mature woman when a man named Bickerdyke asked her to marry him. Robert Bickerdyke was a widower with children, but Mary Ann said Yes. In due course, when Mary Ann became a mother, her friends noticed she did not know the difference between her own children and her stepchildren. Mary Ann was that way in other respects, too. In the days when salvation was considered a matter of sectarianism, Mary Ann was a Congregationalist, yet would worship with the Methodists or the Unitarians; it depended simply upon whatever church happened to be convenient when she felt the call to communion. Her marriage was a happy one, although it is a safe guess that Mr. Bickerdyke was frequently perplexed. After Mary Ann became a widow, she used to say, "There really was nothing wrong with my husband, and he might have lived twenty years longer, if he had not worn himself into the grave trying to boss me. He wanted me to do everything in his way, and just as he did; but his way was too slow, I couldn't stand it."

Mrs. Bickerdyke (1817-1901) was approaching forty-four when the winds of war swept over a divided nation. She was then living in Galesburg, and from this town in western Illinois she volunteered as an army nurse. On the Mississippi River at the Ohio's mouth, in that fertile tip of the Prairie State popularly known as Egypt, lies the strategic city of Cairo. Early in the Civil War, large numbers of untrained Union troops were dumped into Cairo without order or discipline, lacking proper commanders and competent physicians. Imprudence and intemperance followed the sudden change from home surroundings, and there was neither time nor thought for sanitation. Confused and overcrowded, Cairo became a camp of sick recruits. Mrs. Bickerdyke arrived in the chaos that was Cairo, and, before she had put down her carpetbag and

unloosened the Shaker bonnet from her brown hair, she took in the situation. Humph! Here was a mess to be cleaned up, and there was to be no nonsense about it, either.

At this time, Mary Safford, of Vermont, was living in Cairo. This young girl was the first nurse from the region who had gone into the camps and hospitals. She fed the soldiers and dressed their wounds, singing to them and praying with them. Among her soldier-patients were men old enough to be her father, and boys of fifteen who should have been grumbling over their schoolbooks. Mrs. Bickerdyke joined Miss Safford, and together they introduced system into the regimental hospitals. Neither of these women knew the meaning of fear, and neither waited for the bugle call to waken them in the morning; they cooperated splendidly, though their methods were different. Despite any provocation, Miss Safford remained gentle and refined, as much of a young lady in the barracks as in the drawing-room. Mrs. Bickerdyke clashed with military and medical officials, for when aroused by injustice, she did not care who they were, or what she said. As she served without pay and worked without authority, various officials warned her to watch her step and guard her tongue, or they would send her home. This was precisely the worst mistake they could possibly have made, for they found themselves in the path of a tornado before whose elemental force they had to retreat.

The destinies of Miss Safford and Mrs. Bickerdyke were also different. The sweet Miss Safford, looking like an adolescent child, unaccustomed to hardship, gave all her health to her country before the war was half over; against her will, she was compelled to exchange the army tents and the hospital boats for an invalid's couch. Mrs. Bickerdyke, of medium height, middle-aged, well-muscled from years of work on the farm and over the kitchen stove, with a nervous system of extraordinary stability, endured to the end. The Civil War portraits of Miss Safford reveal a sensitive and cultured face; those of Mrs. Bickerdyke show her as wholesome and motherly, without a trace of the tigress. Miss Safford left the army in the heat of the battle, but not before she had gained the gratitude of thousands of soldiers, who called her the Cairo Angel. Mrs. Bickerdyke, also, earned a soubriquet at Cairo: no soldier called her Mrs. Bickerdyke, for every soldier called her Mother Bickerdyke.



Mother Bickerdyke insisted that men must eat, and therefore a room with a cooking-stove was hired for her exclusive use. She turned that room into a sick-diet kitchen, distributing meals which caused the men to swear, in the most violent oaths, that the grandest cook in the world was in Cairo. She was unrivaled as a forager, and would appear from nowhere with her arms full of provisions which no one else had been able to find. As her resolution was unshakable, and her energy inexhaustible, increasing responsibility was thrust upon this woman who treated the city of Cairo as if it were her household in need of a good dusting. Local societies throughout Illinois, sending hospital supplies to her vicinity, forwarded almost everything in care of Mrs. Bickerdyke. The earliest shipment of delicacies from the Chicago Sanitary Commission to the patients in her region was directed to Mrs. Bickerdyke.

After the battle of Belmont, the first which Grant fought as a commander (Nov. 7, 1861), Mother Bickerdyke was appointed matron of the large post-hospital, and in addition she visited daily the other hospitals in the town. She claimed that the sick and wounded officers were certain to receive attention, and so she devoted herself entirely to the private soldiers. She caught a wardmaster wearing shirt, slippers, and socks from her supplies; in the presence of the patients, in his own ward, she seized him by the neck and took off everything except his pantaloons. She spent hours cooking for the patients, and her blue eyes blazed when these delicacies were stolen. Once she stewed a quantity of peaches, and went away after placing them on the kitchen table to cool. She did not have to wait long for the squawking and cries of poisoning. She came in and stood with her arms akimbo, a scornful smile on her face as she surveyed the retching, pale-green culprits: "Peaches don't agree with you, eh? Don't like tartar emetic, eh? If you don't quit stealing, one of these nights you'll eat something seasoned with ratsbane."

On the left bank of the Cumberland River, commanding the water's approach to Nashville, stood the Confederate stronghold of Fort Donelson (captured by Grant, Feb. 16, 1862). Here occurred the earliest of the nineteen hard-fought battles in whose aftermath Mother Bickerdyke participated. She went by boat from Cairo to remove the wounded soldiers from the field of Fort Donelson. As soon as they were brought aboard the crude hospital boat, Mother amazed all who beheld her. She was commissariat, diet-kitchen, ambulance service, and nursing staff.

There was nourishment for starving men, and delicious drinks for all who thirsted. Blood-stiffened uniforms were removed, and out of magic cabinets appeared clean, hospital garments. The frozen mire of the battleground was washed from bodies which had never thought to rest in a bed again, and hardened filth was sponged from clotted wounds. From everywhere in the boat came the incessant cry of Mother! Mother! Mother!—and Mother was everywhere. A volunteer surgeon on the boat spoke for all when he said, “I never saw anybody like her. To every man she turned with a heavenly tenderness, as if he were indeed her son.”

Five times, Mother came down on the boats from Cairo to take away the wounded men from Fort Donelson. Finally, it was believed all who survived had been removed to the hospitals. Looking from his tent at midnight, an officer saw a phantom light on the silent and abandoned battlefield. It moved here and flickered there; it was still for a moment, and then moved again. The officer was puzzled, and sent his orderly to investigate. A woman was groping among the dead, turning their cold faces toward her, until she found one whose faint lips murmured “Mother.” In medieval times, Saint Catherine of Siena carried a little lamp when she visited the hospital in the evening; from the shambles of Scutari, the light from Florence Nightingale’s lamp shone over the world; on American soil, Mother Bickerdyke was the Lady-with-the-Lamp.

When the dew was on the grass, Mother could be seen inspecting the hospital tents. Under a burning sun, she would walk blood-stained fields to give a soldier a drink and bind up his wounds. Late at night, when the lights were turned low, she would move quietly among the sleeping men. A sleepless patient once asked: “Are you not tired, Mother Bickerdyke?” In her usual brisk manner she answered: “What if I am? I am well and strong, and I want you to be that way, too.” It is not surprising that the soldiers saluted her as she passed, and many could not mention her name without tears. As they caught sight of her in camp, they greeted her with cheers, three-times-three, in a rising crescendo of deafening hurrahs. She silenced them with a formula which became familiar: “For heaven’s sake, boys, stop your nonsense, and shut up!”

As Mother could accomplish the most difficult tasks, she was appointed an agent of the Sanitary Commission. It was a rash move, for Mother promptly proceeded to give the commission some of its worst headaches. She purchased immense quantities of hospital supplies without waiting to



inquire whether the commission had the funds to pay for them. She borrowed money which she spent for the soldiers, and the commission was held responsible for this money, since Mother was its accredited agent. She swamped the commission with an unending stream of bills, notes, and vouchers. The businessmen of the commission could not make head or tail out of her transactions. The ladies of the commission, Mrs. Livermore, Mrs. Porter, and Mrs. Hoge, sighed through their smiles. They loved Mother and said she was grand, but admitted the irregularities of her methods. Perhaps Mother knew what she was doing after all, for her bills, notes, and vouchers simply had to be met. The commission solved the problem by making an appeal in the name of Mother Bickerdyke, and everything was paid by her personal friends.

After Fort Donelson had passed into history, Mother went among the troops at Savannah. While nursing the many sick and wounded, there occurred unexpectedly the slaughter of Shiloh (April 6-7, 1862). It required all of Mother's ingenuity to distribute the vast stores needed of condensed food, clothing, stimulants, chloroform, and surgical instruments. Along the Tennessee River, the government boats and the boats of the Sanitary Commission brought supplies, but they were not sufficient. Mother often drove around in an ambulance, foraging for eggs, milk, butter, and fowls, always aided by the contrabands in the vicinity.

One day, a surgeon who was leading an injured man to the rear, found a strange figure on the field. It was Mother herself, but, as she had lost her Shaker bonnet and had given her blanket-shawl to a soldier, she was wearing a soft, slouch hat and the gray overcoat of a rebel officer. Unconscious of her appearance, there she was, with the log fires crackling beneath her kettles, handing out hot soup, tea, panado, crackers and bread, passing the whiskey around, and dressing wounds. The surgeon must have been a newcomer in the war, for he wanted to know who she was, and under whose authority she was working. He had never seen two human hands do so much at the same time.

Mother, the ardent loyalist, was enraged at all who attempted to destroy the United States of America. She detested the secessionists, referring to them contemptuously as "secesh." Her prejudice was such, she maintained the milk of Southern cows was swill, and their hens laid rotten eggs. Mother was inconsistent in her hatred only when a wounded rebel fell into her hands. Just as she had been unable to distinguish between

her own children and her stepchildren, she now could not tell the difference between a wounded Federal and a wounded Confederate. She was as tender to the soldiers of the enemy as to the soldiers on her side. The boys in gray whom she nursed, called her Mother as naturally as did the boys in blue.

In the eruption of war, the reverses on the checkerboard of life are unpredictable. War takes those of high reputation and tosses them aside, and it picks up the obscure, pushing them to the front. When the bugle sounded the call to arms for the Civil War, it was heard by an ex-officer who had resigned his post when charged with drunkenness; after failing in one business after another, at the age of thirty-nine, he was clerking in his father's leather store in the little town of Galena, Illinois, with no prospect of earning more than \$800 a year. Who could have foreseen that before the drums of war had ceased to roll, this same silent man, hiding his face behind a scrubby beard, would develop such power for hammering the enemy that he would become the savior of the Union? Mother knew Grant well, and, on more than one occasion, gave him the benefit of her advice. Grant held Mother in esteem, and presented her a pass which allowed her to go anywhere in the army at any time. Circumstances made Grant a great shedder-of-blood, yet he shrank from the sight of this peculiar juice. It is odd that such military genius was bestowed upon a man who saw no glory in war. On the dark night of Shiloh, Grant refused the shelter of a room, for the surgeons were operating, and the General found it easier to rest outside in the rain. To Mother, blood was a familiar fluid.

The Savannah hospitals emptied, as the men were transferred North. Mother followed the army, receiving the wounded from various skirmishes and the battle of Iuka in Mississippi, superintending the laundry, food, and nursing of thousands of disabled soldiers. She moved with the troops to Corinth, and on the second day of that famous battle (October 3-4, 1862), shells from the enemy's artillery burst into her hospital. It became necessary to carry the bedridden men to the woods, where they remained until the battle was over. The wounded from the battle of Corinth lay in tents, and Mother ordered them brought into her large hospital. After she had been informed that all had been removed, she went to investigate.

Tent after tent was empty, until in one she lifted up a fly-covered



blanket and saw a soldier underneath. His left shoulder and leg were broken, he had been shot through both cheeks, and his mangled tongue was swollen to bursting in his mouth. He appeared to be past all aid, but was still breathing. The first thing to do was to carry this half-dead man on a stretcher to her hospital. Then Mother played a dual rôle: denouncing with pitiless fury those who had overlooked the wounded soldier, she nursed him with unceasing tenderness. As Mary Livermore personally observed, Mother fought for his life, inch by inch, and hour by hour. Many years after the war, he used to tell of the nurse who brought him safely through the valley of the shadow of death.

Mother dressed in calico, and since much of her cooking was done over log fires in the open air, sparks often fell on her clothing. One of Mother's dresses came into the hands of Mary Livermore, and was kept by the Sanitary Commission as a curiosity. The dress was so full of holes that it looked as if it had been riddled with grape and canister. "The boys were all the time putting me out," explained Mother, meaning her dress; "and a dozen of 'em were grabbing me whenever I was cooking by the log fires, for the fire would snap, and my clothes would catch, but I couldn't tell where." The status of Mother's wardrobe became notorious, and ladies from various parts of the country sent her fine clothes. Mother was grateful for these bundles, for she traded them to the Southern women for fruit and honey for her soldiers.

Among her gifts were two long nightgowns, trimmed with ruffles and lace. Obviously, it had not occurred to the donors that, where Mother slept, such elegant and embroidered nightgowns were not appropriate. Mother never wore them, but she had them with her when crossing a railroad track on which stood an ambulance. Mother never passed an ambulance without looking inside, and she saw two soldiers who were going home on furlough; they were hungry and filthy, and their undressed wounds swarmed with vermin. Mother washed and cleansed their wounds, and searched for a bandage, but there was not a bandage in the ambulance. "Humph!" she exclaimed, "now I see what them furbelowed nightgowns were sent down here for. The Lord meant I should put 'em to a good use, after all."

Mother tore the bottom of each nightgown into strips, and employed them as bandages. She rummaged through the ambulance, and found socks, drawers, and handkerchiefs, but not a single shirt. "Here, boys,"

she said, "put on the upper half of these nightgowns; they're just the thing. My sakes! but this is lucky." Now, the female finds it piquant to wear the garments of the male, but a man simply feels silly in feminine attire. The two soldiers seized their own dirty shirts, which had not been changed in two months, and insisted they were good enough. "Oh, pshaw, boys! don't be fools!" said Mother. "Nightgowns or nightshirts—what's the odds? These will be softer to your wounds, and Heaven knows they're enough sight cleaner. Put 'em on, and wear 'em home. If anybody says anything, tell them you've jerked 'em from the secesh, and the folks will think a heap sight more of you for it."

So the warriors put on the dainty gowns which never were designed for manly breasts. In passing through Chicago, they stopped at the Soldiers' Home for treatment of their wounds. Their remarkable shirts attracted attention, particularly when they were found to be marked in indelible ink with the name of Mrs. Bickerdyke. It was suggested that they exchange these nightgowns for genuine hospital shirts, but the men refused to part with them. A quarter of a century later, when Mary Livermore wrote her story of the war, she pointed out that one of these nightgowns was still preserved in a Wisconsin household as a sacred relic.

In November 1862, Mother went on her first vacation from the war. The doctors who, by this time, knew her worth, seeing she was exhausted and realizing she would never admit it, compelled her to take a furlough. So Mother packed her carpetbag and tightened the strings of her Shaker bonnet. She journeyed north to Chicago, to the home of her friend, Mary Livermore. In those days it was not easy to find Mrs. Livermore at home, and Mother was admitted by the cook, Norwegian Martha. Mother took a bath and went to bed. When Mrs. Livermore returned, Martha told her there was a nurse woman who reminded her of her mother in Norway.

After tea, Mrs. Livermore had to leave again, to attend a wedding. Mother got out of bed and insisted on going with her. The aged clergyman who officiated, prayed a long time as if he feared the Lord would forget his admonitions, he read the Scriptures interminably, and when the audience felt it could endure no more, he began an exhortation to virtue, divided into firstly, secondly, thirdly, and so on, which developed into a homily on life and death. Mrs. Livermore, a woman of many duties



in the midst of war, suffered in silence; yet she smiled at Mother, who was sound asleep and did not hear a word.

When Mother was introduced to the bride, she said, "My dear, I have enjoyed your wedding very much; it has done me as much good as a prayer-meeting. I am very much refreshed by it." Suddenly, there was the roar of a masculine voice: "Why, Mother Bickerdyke! God bless you!" cried the bridegroom. "Don't you remember me? After Donelson I was brought up on one of the boats, with a minie-ball in my leg, and you helped me save my leg. You took care of us all. I'm a major now, Mother Bickerdyke." Since the battle of Fort Donelson, thousands of wounded men had passed through Mother's hands: she could not recall this case, but the chance meeting was characteristic of the times.

This restful wedding was the only recreation Mother permitted herself during her vacation. The very next morning she began to work. Mrs. Livermore watched over her, for, while Mother could take care of an army, she was utterly regardless of her own needs. Mother became an interviewer, cornering the North's leading citizens, the Shaker bonnet nodding like a plume in the halls of finance; she blossomed out into a lecturer, speaking at crowded meetings in Chicago, Springfield, Galesburg, Aurora, Milwaukee, and many other cities. Mother was irresistible on these occasions. Her simplicity and earnestness, her unusual common sense, her energy and pluck in the nation's crisis, the glory and pathos of her story of the heroism and suffering of the soldiers, secured the confidence and aroused the sympathy of all who heard her honest voice. At her bidding, large sums of money and enormous quantities of drugs, food, clothing, were donated to the Sanitary Commission. That was how Mother, the superb saleswoman, rested during her first vacation from the war.

In January 1863, Mother reported for duty at Memphis, and immediately came into conflict with the medical director. With ten thousand military patients in the Memphis hospitals, Mother and the medical director faced a tremendous problem, which was made all the more difficult by their arguments and quarrels. The medical director was youthful, assured, industrious, and skillful. As a member of the regular army, he insisted upon the obedience which he was accustomed to receive, but Mother was notoriously independent. A Catholic himself, he favored nuns as

nurses, and he was annoyed because Mother was a Congregationalist. As an educated man, he preferred to associate with those who respected English grammar, and he was jarred by Mother's habit of saying "shan't" and "ain't." So they fought all the time, until Mother was heard to remark: "If the Doctor is going to be ugly, he'll find that two can play at that game, and a woman is better at it than a man."

As Mother's work increased, she employed, in the hospitals, from fifty to seventy colored men and women, then known as "contrabands." The medical director determined to get rid of them and send them to a contraband camp. One day, he issued an order that they were to be gone from the hospitals by nine o'clock of the following morning. Mother heard of the order late at night; it was raining hard, but there was no time for dawdling. She got into an ambulance, drove over perilous roads in the downpour, arrived at headquarters, routed the general out of bed, and would not let him go back until he signed a paper.

The next morning the medical director entered the Gayoso Hospital, and saw the Negroes all over the place, calmly at work. With blood in his eye he went looking for Mother, and found her in the kitchen, stirring the soup. His tone was threatening as he demanded to know why she had disobeyed his order. Mother seasoned and tested the soup. Now, nothing infuriates a man so much as a woman tasting soup when he is shouting at her. As his rage increased, Mother put her hand in her apron pocket and showed him the order from the general, countermanding the order of the medical director. It was a slap in the face, and the medical director delivered his ultimatum: "I will not have you here in Memphis. You will be sent home before you are a week older."

At the reference to home, Mother dropped her soup ladle and turned on him: "I shan't go! I've come down here, and I mean to stay until this thing is played out. I've enlisted for the war, as the boys have, and I'll not go home afore them. It's no use for you to try to tie me up with your red tape. There's no sense in your getting mad because I don't play second fiddle to you. I tell you, I haven't got time for it. And, Doctor, you hadn't better get into a row with me, for whenever anybody does, one of us two always goes to the wall, and 'tain't never me!" One might surmise that, after this tirade, the medical director would have become her eternal enemy. But a curious thing happened. His eyes were suddenly opened, and his antagonism melted in the fire of her challenge.



Mother and the medical director developed into the best of friends and collaborators.

One day, Mrs. Livermore was standing in the kitchen of Mrs. Bickerdyke's hospital. From President Lincoln down to the youngest drummer-boy, the name of Mrs. Livermore was held in esteem. Mrs. Livermore saw many of the dramas of the war, and, on this occasion, was destined to witness an incident she never forgot. It was noon, and the ward master of the fourth floor came in to report to Mother that the men had not yet had breakfast, as the surgeon in charge of the special dietary could not be found. When men were hungry, Mother spared no one. She sent several orderlies running ahead with trays of food, and shoving a six-gallon pail of hot soup over to Mrs. Livermore, she herself picked up two of these heavy pails, crying, "Follow me! Come, make yourself alive, Mary Livermore! Try to be useful! Help these men!"

In the hospitals, Mrs. Livermore always did as Mother told her, and she proceeded to stagger after her older, but stronger, friend. In the fourth story, they sat down to feed adults who were as weak as infants. From time to time, Mrs. Livermore watched Mother, who fascinated her: to her astonishment, she saw the tender expression darken and harden into menace. Rising from a soldier's bedside, Mother was transformed into a tigress. The absent surgeon had just entered the ward, yawning from a night's debauch. Mother stood in his way, and pounced upon him: "You miserable, drunken, heartless scalawag! What do you mean by leaving these fainting, suffering men go until noon with nothing to eat? Not a word, sir! Off with your shoulder-straps, and get out of this hospital! This is your fourth spree in a month, and you shall go where you belong. Off with your shoulder-straps, I tell you, for they've got to go!"

Mother had no authority to oust an unworthy physician, any more than she possessed the power to reward a faithful one, yet in less than a week the disgraced shoulder-straps were out of the hospital. (Mother's new friend, the medical director of Memphis, rendered her this service.) The surgeon, now thoroughly sober, complained to Sherman himself. General Sherman, knowing the need for surgeons in the army, was puzzled:

"What are the charges against you?" he asked. "Who is your accuser?"

"I suppose it was the doing of that meddling old woman they call Mother Bickerdyke."

"Ah," replied Sherman with finality, "then you are indeed out, and I cannot help you. She ranks me. There is nothing left for you to do except to bring your case before President Lincoln."

Early in the war, Mother noticed that dirt-covered, blood-saturated, and vermin-swarming uniforms were burned or buried. Her housewifely instincts disapproved of this waste, for she knew the filthiest clothes could be made clean again. From the Sanitary Commission of Chicago she obtained washing-machines, portable kettles, wringers, caldrons, and mangles; with contraband aid she supervised the laundering of the army. After the foul garments were thoroughly boiled with disinfectants, they were packed in boxes and labeled, ready for the next battle. At Holly Springs, Mississippi, a million dollars' worth of material was lost by blundering, and in the emergency Mother's laundry system at Memphis proved extremely useful.

Mother was always looking for trouble, and found plenty of it. Her laundries and diet-kitchens, together with her work as matron of the Gayoso Hospital (known to the soldiers as Mother Bickerdyke's Hospital), did not prevent her from going every week to Fort Pickering, two miles down the river from Memphis. A smallpox hospital was located there, and Mother knew that the victims of smallpox caused such terror that they were more likely to be neglected than any other patients. When she found evidence of indifference, she assailed the attendants with such vehemence that they decided even smallpox was less to be dreaded than Mother's wrath. As Mother used to say, "I have to look after this hospital pretty sharp, for smallpox patients are mighty apt not to be taken good care of."

The government managed to send to the Memphis hospitals sufficient quantities of tea, coffee, sugar, and flour, and even the meat was usually of good quality, but milk and eggs proved a baffling problem. These necessities could not be transported from the North, and were difficult to obtain in the enemy's country. Mother complained, "We are paying these Memphis secesh fifty cents for every quart of milk we use, and the stuff is mostly chalk and water—if you poured it into the trough of a respectable pig at home, he would turn up his nose, and run off, squealing in disgust. I'm going to take a month's furlough, and I'll go home and get all the milk and eggs that the hospitals in Memphis can use."



It was explained to her that the best-packed barrels of eggs would be spoiled before they arrived, and that milk from any distance would be useless before it reached the heat of the Tennessee summer. But Mother said that milk and eggs came from cows and hens, and her plan was to get enough cows and hens to have milk and eggs of their own. Her friends assured her this would be a wild-goose chase, and people would laugh at her from one end of the country to the other. "Humph!" said Mother, and in the face of protestations, the strings of the Shaker bonnet were pointed north. Up to St. Louis, she was accompanied by several hundred crippled soldiers whom she entered in the hospitals.

Then she went alone to Chicago, and began to look for cows. She met Jacob Strawn of Jacksonville, one of the wealthy farmers of Illinois, and said to him, "I want cows." Jacob went among his own herds, and rounded up his neighbors', and without delay Mother was mistress of many cows. She called for chickens, to be shipped to the Chicago Sanitary Commission. Within a week all the rooms were crowded with poultry, which drove every human worker from the building: Mother had transformed the commission into an enormous henhouse. Her object achieved, Mother turned southward, in charge of over one hundred cows and a thousand fowls. Her triumphal march to Memphis was heralded by a lowing and cackling and crowing such as the city had never heard. As the inhabitants could not endure the barnyard noises, a near-by island in the Mississippi was placed at Mother's disposal. In this pleasant retreat, she arranged her dairy and hennery, giving an abundance of fresh milk and eggs to all the hospitals of Memphis.

Mother again arrived in Chicago, and this time she was a celebrity. Furloughed soldiers throughout the Northwest had spread the fame of their picturesque nurse, and the story of her success in bringing cows and chickens to Memphis was repeated as frequently as a popular song. Mother's arrival in Chicago was announced in the papers, and the whole town wanted to see her. Mother refused to participate in any banquets, preferring to call upon the families of soldiers who were patients in her hospital. Mary Livermore declared that attention poured like a flood upon Mother: receptions were planned, parties were discussed, and invitations to lunch came by dozens from the best people. Everyone made a fuss over Mother, who did not even bother to answer the invitations. "The ladies of our organization would consider it a privilege to arrange a

dance in your honor—" Mother stopped the nonsense with the remark: "Our country has a big war on its hands, and this is no time for visiting and frolicking."

Within a few days, Mother returned south, to take charge of the field-hospital on the edge of Chattanooga. She saw the battle of Lookout Mountain, the famous "Battle above the Clouds," watching the combat until the clouds obscured the blood. From the conflicts around Chattanooga, the sick and injured were removed to Mother's hospital in the forest: for several weeks she was the only woman in the midst of an army of wounded men. In November and December of 1863, it became unaccountably cold in Tennessee, and Mother's men lacked food and clothing. Army wagons hauled the supplies from the Sanitary Commission, but they were not fast enough, and all waited for the railroad that was being built to Chattanooga. The reproachful eyes and strange calls of ten thousand famished mules and horses, unnerved men who were themselves suffering from starvation. Mother went on one of her foraging adventures, and one day in an abandoned mill she found an immense quantity of flour which had belonged to the routed army of General Braxton Bragg. Mother took the flour and baked bread in brick ovens which she constructed from demolished chimneys. The men ate the bread, but another abandoned mill with flour could not be found, and hunger advanced upon the camp.

On the last day of the year 1863, it was so cold the thermometers split. Dew point fell below freezing point, and hoarfrost lay over the land. Outdoor business ceased as the Arctic descended upon an unprepared America. In teeming Chicago the streets were empty, for on that glacial eve of the New Year, fat men in fur coats trembled on their thresholds. In southern Tennessee, the winds striking Lookout Mountain with a thousand whips, meeting the currents from the valleys of Missionary Ridge, joining the frenzied rain that turned to glare ice as it touched the earth, went tearing and screaming around in a hurricane dance of nature in madness.

Hospital tents were overturned in that mountain gale, with convalescent soldiers bouncing and rolling along the ground, opening half-healed injuries and refracturing reset bones. There were several hundred wounded soldiers in those hospital tents, and the weakest among them would perish without warmth. Logs were piled high, and for hours the fires of life



fought the winds. In the middle of the night the flames died, and despair surrounded the ice-encircled camp. There were no more logs, and in the night of that polar storm it was impossible to cut trees in a frozen forest. The officer in charge spoke helplessly as he retired: "We must try and pull through until morning. Good-night."

Mother stood by a hospital tent and had no intention of going to bed. She knew she must think fast if her sick boys were to be saved from freezing to death. She looked at the earth-filled breastworks of logs built for battle during the campaign, but no longer of use. She prepared a quantity of panado, consisting of crackers, sugar, hot water and whiskey—it was magic refreshment the way Mother made it. She gave each member of the Pioneer Corps a cup of panado, and ordered bags of meal to be broken open and mixed with warm water for the mules. Then Mother asked for the logs from the breastworks, so the fires could be started again. The Pioneer Corps realized that only the commanding officer was authorized to demolish breastworks, but they never disregarded Mother's orders. Willing hands seized axes, hooks and chains, as men and mules pulled down the breastworks.

Soon the logs crackled again, and fire, man's primal servant, never burned to better purpose. Mother was wonderful that night. She ran from tent to tent, in one hand holding hot bricks and in the other carrying hot drinks. Fifteen hundred men lay on their backs, and Mother comforted them with hot bricks (the primitive hot-water bag), panado, coffee, her salted speech and quick smile. Endurance seemed to have reached its limit, when a high cry of horror was heard. A volley of musketry by the enemy would have aroused less consternation. Ice-covered men driving ice-covered mules drove into the camp. Thirteen ambulances filled with wounded men, had started in the morning from Ringgold for the hospitals in Chattanooga, but the fury of the storm had delayed their arrival. Mother opened the ambulances, and saw the War: every bandage was glass; a soldier's intestines, hanging from his body, had become an icicle; frozen feet that never would walk again; human hands changed to marble. The surgeons worked through the night, amputating the limbs of youthful manhood.

At dawn the commandant of the post was informed of the destruction of the breastworks. When he appeared, the logs were still burning, and there was Mother still running among the tents, holding hot bricks

in one hand, and in the other carrying hot drinks. "Madam, consider yourself under arrest!" said the Major. As Mother ran past him, she answered, "All right, Major! I'm arrested! Only don't meddle with me now, or my men will freeze to death." The rumor that the Major had put Mother in the guardhouse was without foundation. Personally, he probably approved of Mother's exploits, but it was necessary to maintain discipline. It was also necessary to hold an official inquiry, but Mother faced her accusers with the words: "It's lucky for you, old fellows, that I did what I did. For if I hadn't, hundreds of men in the hospital tents would have frozen to death. No one at the North would have blamed me, but there would have been such a hullabaloo about your heads that you would have lost them." An officer cleared his throat, and whispered in her ear: "Pursue the same course again under the same circumstances." The inquiry ended, and Mother returned to work.

Chattanooga, on the Moccasin bend of the Tennessee River, surrounded by Signal Mountain, Missionary Ridge and Lookout Mountain, was America's cold hell in the winter of 1864. Again and again, the Union forces were victorious, and the conquerors walked in paths of their own blood and left their bones to bleach on the mountainsides. Sherman's men were dressed in the light blouses of summer, and they needed furs and food. It seemed that the railroad would never be ready, the railroad that was the artery of life for starving Chattanooga. Whole brigades were called out to receive as their daily rations, three ears of corn to a man; when the ribbed mules and horses were fed, guards stood over them with loaded guns, so the soldiers would not steal the fodder. Mother concocted soup from stuff that never was mentioned in any cookbook: the hungry army consumed it with gratitude and greediness. This, too, gave out, and still the exhausted and famishing men came trooping in. Mother bathed their swollen and bleeding feet with warm water, and there was little else she could do for them. At last, the magic hands, which had so often brought food out of the air, were empty. Mother's calico dress hung loosely on her thin body, and the well-muscled arms became lean.

That terrible winter kept the approaching spring away. One day, when Chattanooga had abandoned hope, a keen-eared soldier heard a peculiar sound in the distance.

Something like a steam whistle, he mocked, ha-ha. The railroad will



never be ready, said a second. The North has forgotten us, sighed a third. The railroad will never be ready, they all agreed. Listen, it's just like a steam whistle. You're dreaming, how could it be a steam whistle? I didn't say it was a steam whistle, I said it sounded like a steam whistle. Rounding a curve, rumbling nearer and roaring on its way, a train pulled in at Chattanooga, awaking camp and hospital from the sleep of abandoned hope. The railroad is here, the North has not forgotten us, the railroad is here with socks and shoes, the North has not forgotten us, the railroad is here with Boston crackers, with barrels of Boston crackers.

The maimed sat up in their cots, reaching with laughter for their rough crutches. Men who could not walk, crept along the ground to see the train. Others moved forward, leaning on the arms of friends. Here and there, a man was strong enough to carry a comrade on his back. It was no illusion, the train had actually arrived, full of underwear and overcoats, loaded with barrels of Boston crackers. Their cheers mingled with the blasts of the puffing and snorting locomotive. Sweetheart, they cried, have you come at last? They petted the iron horse as if it were a favorite pony.

Too brief was their joy, and the delicious Boston crackers turned to dust in their mouths. For the first time Mother, who had worked too hard and fasted too long and lost too much weight, broke down. A new matron took charge of the hospitals in Chattanooga, and the shadow that was Mother silently journeyed to the North.

Mary Livermore fattened Mother up, and it was not long before she regained her strength. In the meantime, Wisconsin clamored for Mother, and would not be denied. She had rendered such services to regiments from Wisconsin that Milwaukee demanded her presence. "I'll go," agreed Mother, "on condition that Mary Livermore goes with me to bear the brunt of the nonsense." Mother was welcomed with open arms, and overwhelmed with attentions. The Milwaukee Chamber of Commerce arranged a meeting in its handsome hall, the gallery crowded with invited ladies. On behalf of the city and the state, the president of the Board of Trade felicitously expressed his gratitude to the honored guest, the heroic nurse of Wisconsin soldiers. Then came the surprise of the evening: the Milwaukee Chamber of Commerce appropriated twelve hundred dollars a month for hospital relief, to be con-

tinued until the end of the war. Next, Mother was called upon to speak, which was the signal for cheers and prolonged applause. Mary Livermore thought she would decline, but Mother walked to the platform and spoke as follows:

"I am much obliged to you gentlemen, for the kind things you have said. I have done no more than I ought; neither have you. I am glad you are going to give twelve hundred dollars a month for the hospitals, for it's no more than you ought to do, and it isn't half as much as the soldiers in the hospitals have given for you. I have two thousand boys in my hospitals in Chattanooga, who have given parts of their own body for their country. And the battlefields not far off, and the graveyard behind the hospital, contain the bodies of thousands of others who have given their lives to save you and your homes. Oh, gentlemen of Milwaukee! don't let us be telling of what we have given, and of what we have done. We have done nothing, and given nothing, in comparison with them. And it's our duty to keep on giving and doing, just as long as there's a soldier down South, fighting and suffering for us." Mary Livermore, the trained public lecturer, testified it would not be easy to match the eloquence and pathos of this untutored speech.

It was proof of the fertility of Ohio that Mother and Generals Grant, Sherman, and McPherson were born there. Sherman was Mother's military idol, and he returned the compliment by regarding her as the most efficient nurse in the army. He attached her to his department (Fifteenth Corps), with instructions to attend his troops. Sherman, who had lived and worked in the South, knew it better and sympathized with it more than any other Union commander, yet no man spread such destruction through the South. Sherman hated the national fratricide, and it was his job, with fire and sword, to finish this cursed war of America against America. "God pity South Carolina!" muttered Sherman as he crossed the state line, for he knew what devastation he had prepared for this section of his country. Sherman on the warpath was utterly ruthless, yet eager for peace and fellowship without a trace of vengeance. He must end this senseless slaughter by overwhelming the enemy with irresistible terror. He would burn the very grass beneath his horse's feet, and only smoldering ruins would be left to tell the story of his triumphant and heartbroken march.

If he thought they interfered with his plans, he did not give a damn



for the whole Sanitary Commission, the State Commission, or the Christian Commission. Their workers, agents, and nurses fled aghast from the lightning of his wrath, and many considered William Tecumseh Sherman as savage as the Shawnee chief whose name he bore. Officially, he was the grimmest, hardest, toughest soldier of them all: Mother adored him, and would have died for him. She was the only one who dared enter his headquarters, against his will, and fight it out with him.

When Sherman loaded Chattanooga with ammunition for his Atlanta campaign, he issued a command absolutely forbidding any civilian to use the railroad from Nashville to Chattanooga. This injunction facilitated military operations, but it cut off supplies to the hospitals below Nashville, except for the inadequate amounts that the mules could pull in ambulances. The Sanitary Commission was in despair as it saw its packing-cases and barrels sidetracked and spoiling for lack of transportation. The hospitals down the road clamored for the material which was blocked by Sherman's mandate. Mother put on her Shaker bonnet, and she said, "I've got to see the General about this." Even those who were inconvenienced by Sherman's order, explained to her the necessities of war, imploring her not to provoke Sherman, or he would chew her ears off. Sherman's order prohibited Mother from using the railroad, but her pass from General Grant gave her the right to go anywhere, so she took the next train for Chattanooga.

A staff officer was astonished at her arrival. "Halloo! How did you get down here?"

"Came down by the railroad, of course. There's no other way of getting down here that I know of. I want to see General Sherman."

"He's in there, and he left instructions not to disturb him until he comes out."

Mother slipped past the officer, and entered Sherman's room without knocking. The dreaded man sat at a table, writing, and he frowned at the interruption. Mother greeted him: "Good morning, General! I want to speak to you a moment. May I come in?"

"I should think you had got in! What's up now?" demanded Sherman with an annoyance he did not conceal.

Mother spoke fast: "General, we can't stand this last order of yours nohow. Sure as you live, you'll have to change it. If we can't get more nurses, we'll work the harder, but the supplies we must have. When the

men are wounded, and drop out of line, and can't carry a gun, you don't bother about them, but turn them over to the hospitals, expecting the doctors and nurses to get them well and put them back into service as soon as possible, but how can we do it if we have nothing to work with?"

"I am busy today, and cannot attend to you now," said Sherman, glancing at his papers.

"No, General! You'll not send me away until this thing is fixed up. You assigned me to your Corps, and told me to look after the nursing. How am I going to do it if you hold up my supplies, and keep my stuff rotting down the road? Have some sense about it, General!"

The eavesdropping guard heard Sherman laughing, but he could not see his twinkling eyes. On occasion, Sherman liked to tease Mother, and, as his work had been interrupted, he began to indulge in badinage. Mother soon squelched him with the words: "I can't stand fooling here all day. Give me a written order for two railroad cars for the Sanitary Commission, and I'll be satisfied." After that, every day, two railroad cars delivered their sanitary stores to the hospitals on the road from Nashville to Chattanooga, and it was Mother who made the cars go.

After Sherman entered Atlanta, Mother distributed food and hospital supplies to the captured city. Sherman left his calling-card in Atlanta—Atlanta is in flames!—and continued marching through Georgia, from Atlanta to the sea. He gave Mother instructions to meet him at Savannah, and, likewise, gave her authority to charter a steamboat. Seldom was a steamboat loaded like Mother's: with her expert hands she filled it with garments, tin cups, dried fruits, canned fruits, crackers, butter, cheese, tea, sugar, condensed milk, tapioca, extract of beef, cornstarch, lemons, oranges, and brought on board a span of mules and her personal ambulance. The boat steamed along, and though Mother was not the captain in name, she was practically in command. Mother never kept her appointment with General Sherman in Savannah. For many things happened, and she was among the first to see the starved and tortured prisoners of Andersonville: there were dying messages to be taken, dead men to be buried, pitiful skeletons to be clothed with flesh, whimpering lunatics to be nursed back to sanity. She knew that Sherman's boys in Savannah were fat and hearty in comparison with the victims of the ghastly horror that was Andersonville. The next time



Mother saw Sherman, the bells of jubilation were ringing wildly, for the war was over.

Throughout the war, Mother had displayed unusual organizational drive and executive ability, but these qualifications were not utilized by the government in the reconstruction period. For the first year after the war, Mrs. Bickerdyke served as housekeeper in the Chicago Home of the Friendless; then she moved to Kansas, where many former soldiers were settling on the 160 acres granted to each by the government. With the cooperation of the Kansas Pacific Railroad Company, Mrs. Bickerdyke opened a hotel at Salina, a town of a thousand inhabitants. Five trains passed through the town daily, for it was on the Santa Fe route, and prairie schooners, going westward, stopped at the hospitable door of the Salina Dining-Hall.

So Mrs. Bickerdyke was now running a flourishing hotel: thirty-three sleeping-rooms, and a dining-room with a capacity of one hundred and ten guests. As soon as she had paid for the property she would become its sole owner, a businesswoman calculating her profits at the end of the fiscal year. Mother was supposed to be smart, but she could not learn a simple law of economics: if you charge less for a meal than it costs, and, in addition, charge nothing to those who cannot afford to pay, it is mathematically impossible to acquire wealth. Mother never became the proprietress of the Salina Dining-Hall, and this should have been a foregone conclusion. The idea of Mother with a bank book is as ludicrous a picture as Joan of Arc in an evening gown and pearl necklace, or Florence Nightingale playing roulette at Monte Carlo.

As soon as Mother devoted herself to others, her energy multiplied with the difficulties. When the locusts devoured Kansas, reducing the people to destitution and despair, the arrival of carloads of food and clothing brought new hope to the Sunflower State. Mother had gone East, and her capable hand was pushing these carloads across the continent. The ruined farmers of Kansas needed seed to replant their crops, and seed came in abundance. Mother, arguing in Washington, was behind the seed that transformed the ravaged fields into the nation's granary. When forest fires spread tragedy throughout northern Michigan, destroying hundreds of lives and the resources of the survivors, Mother hastened to the scene, collecting and distributing supplies, gathering together broken households, rebuilding homes in the Wolverine State.

Under the most adverse conditions Mother, the instinctive nurse, could bring comfort to a multitude, but where her personal finances were concerned she was a failure. As the result of her peculiar bookkeeping, she lost control of the Salina Dining-Hall and moved to California. She was so poor that, year after year, her friends did their utmost to obtain a pension for her. They were successful at last, and when Mother's brown hair was sprinkled with white, she was granted a government pension of twenty-five dollars a month. During her residence in San Francisco, she secured a minor position in the United States Mint. Every post of the Grand Army of the Republic wanted to take care of her, but Mother put her foot down: "The boys have all they can do to make a living for themselves and family, and they shall not be weighted with the care of me."

A generation after the war, a soldiers' convention in Topeka, Kansas, was attended by thousands of veterans. At the beginning, parliamentary procedure was followed, but soon there was disorder in the rear. The exasperated chairman rapped with his gavel as he shouted: "Gentlemen in the rear of the house must come to order, and take their seats! It is impossible to transact business in this confusion." The chairman was ignored as more and more men craned their necks and leaped from their seats. Suddenly, agitated voices cried: "Mother Bickerdyke is here!" This announcement was the signal for a riot. The blood of every man was stirred as spontaneous cheers shook the convention hall. The chairman hurried down from the platform to join the excited mob.

"Mother! Mother! Mother!" repeated the gray-haired and gray-bearded men. Crutches hobbled fast to get to her, and empty coat-sleeves were waved in the air. "Mother, do you remember me?" They pressed close, and fought for a glimpse of her. "Mother, do you remember how you found me after the siege of Vicksburg?" In her presence, the winds of old memories swept over the hospital tents of the battlefields. Choking with emotion, the men imprisoned her in their arms, laughing and weeping, kissing her, and caressing her. She struggled to release herself, exclaiming, "Why, boys, how you behave!" They whooped like youngsters and blinked their moist eyes and loved her familiar scolding beyond all words. Her brown hair was streaked with snow, and the hands that never wearied in the war were now crippled, but at the sound of



her voice, after all these years, they knew that Mother had not forgotten her boys.

Long after the war, Mary Livermore, who was one of the most distinguished lecturers of her time, was invited by Warden Gideon Haynes to address the inmates of the Massachusetts State Prison at Charlestown. At the conclusion of her talk, the Warden said that those who wished to speak with Mrs. Livermore could remain in their seats. The majority of the convicts shuffled back to their cells, but a few remained behind. Mrs. Livermore soon learned that they had been soldiers once, for the first one asked, "Mother Bickerdyke—is she still alive?" The second wanted to know, "Did Mother Bickerdyke get her pension yet?" The third asked, "Will you give me Mother Bickerdyke's post-office address?"

In our future wars for the defense of democracy, there will be no room for another Mother Bickerdyke. Official rank and definite duties are now assigned the superintendent and members of the Army Nurse Corps, which is an integral component of the military forces of the United States. The pioneer ways of Mother Bickerdyke have gone with a departed period of American history. A prescribed uniform has replaced the blanket-shawl, the calico dress, and her Shaker bonnet. The Civil War is America's greatest tragedy, whose wounds have not healed with the balm of a century, yet it is a tragedy brightened by noble names in the North and in the South. America will lose a precious heritage if ever it permits these names to be forgotten. New ways and new names claim our attention, crowding out the old. From time to time, green leaves should be entwined with the sear laurels of the nurses of the Civil War. The tale of one of these nurses has here been retold for the present generation, for Mother Bickerdyke belongs to the saga of America.

# XI

## The Case of Clara Barton



### DUNANT

The dawn of the twenty-fourth of June 1859 was beautiful in Italy, except that it was too hot. Men, who should have been sleeping, had been marching all night, and at daybreak they were tired and hungry. The dew yet glistened on the grass, and the awakening songs of the birds in the mulberry trees were drowned by the beating of drums and the blowing of bugles. At five-thirty in the morning, peasants and cattle began to hide, for they do not like the peculiar music of musketry. Men who had been brothers, in the rain of bullets and the blinding smoke of cannon, crashed each other's skulls, swung their swords at each other's necks, and sweated and screamed as they disemboweled each other with bayonets. The noonday sun was burning, as the dying and the dead piled up in ravines and on the blood-covered hills. Human beings, changed into the wildest of beasts, rode their horses over their fallen fellow-men until they fell in their turn. A black army of crows waited for the living to depart, and countless flies were already tasting the wounded and feasting on the corpses. It was now intensely hot, but the cries for water were unheard or unheeded.

In this famous battle of Solferino between Franco-Sardinians and Austrians, among the three hundred thousand participants were generals, marshals, counts, barons, princes, a king, and a couple of emperors. Yet the most important personage at Solferino was none of these: Solferino is not recalled because of Francis Joseph, although he was then young and brave; nor is it remembered because of the tricky dictator, Louis Napoleon, who sat on a white horse, smoking cigarette after cigarette. Today the name of Solferino evokes the memory of one man, a man



who had no function there, for he was a noncombatant and knew nothing about war or politics; he was a Swiss industrialist whose light, linen suit contrasted with the impressive uniforms around him. More than once, he was asked: "Who are you?" and "What do you want?" Such questions were not easy to answer, for the traveler from Geneva, with his fashionable whiskers and heavy gold watch-and-chain, having stumbled into the blood bath of Solferino, was no longer a gentleman with a comfortable soul; and he wanted what had never been on earth.

The wealthy banker from Geneva, the director of certain mills in Algiers, pampered in his childhood and self-indulgent in his manhood, was suddenly introduced to pain and suffering and death. Boys, graduated a few weeks from Saint Cyr, died from blood poisoning; veterans expired in the convulsions of tetanus. He saw men shrink from amputation, and later heard the same men begging for amputation, for their pain was intolerable. Three days and three nights the dead lay on the silent battlefield, more fortunate than those who perished in the hospital wards from gangrene. Those who died on the field of glory did not become infants whimpering, "Do not leave me to die. . . . Do not let me fall. . . . Water, water! . . . Help me! . . . Oh, it is enough, let me die. . . ."

The interloper hired a horse and cart, and made the rounds of the hospitals. On the way, he saw that fields ripe for harvest were ruined, the grain trampled by the wheels of heavy cannon. He entered the operating rooms where he saw men die because there were no trained nurses who knew how to compress bleeding arteries; he heard men screaming as the doctors sawed muscle and bone, because they did not have assistants to administer chloroform.

In one of the churches of Castiglione, called Chiesa Maggiore, five hundred soldiers are crowded together on the floor; outside one hundred more are suffering. His purse buys sponges, linen, pins, cigars, tobacco, camomile, mallow, sambuca, oranges, sugar, and lemons. He organizes a corps of volunteers to search for the wounded, to bring them to improvised hospitals, and to nurse them. The boys of the neighborhood run to the near-by springs with buckets; the women of Lombardy carry pitchers of clear water to the soldiers, assuaging their thirst and bathing their wounds; some of these amateur nurses are motherly old women, others are lovely young girls.

The Swiss stranger, who has purchased all the clothes and as much food as he can obtain, himself becomes a nurse, washing wounds, giving bouillon to patients, and wrapping them up. They do not know who he is, but because of his costume they call him the "Gentleman-in-White." Some English tourists enter the hospital-church out of curiosity, and soon wish to depart; without any authority except that of humanity, the gentleman-in-white forces them to remain as helpers; other English visitors come of their own accord; an Italian priest, a merchant from Neuchâtel, and a journalist from Paris joined the volunteers. The gentlemen-in-white had arrived near the Chiesa Maggiore, just as two enemy soldiers, too badly wounded to stand up, were being thrown down the steps of the church. "Stop!" he commanded. "*Tutti fratelli!*" Strange words to be spoken in hell, but the women of Castiglione were now repeating them: "All are brothers." Solferino inflicted upon the gentleman-in-white a wound from which he never recovered: Jean Henry Dunant was reborn in the agony of Solferino.

With the passing of the years, the number of wounded and killed at Solferino, which included three field marshals, nine generals, more than fifteen hundred officers, and forty thousand soldiers, was becoming merely a matter of military statistics: it would be called the most sanguinary struggle since Waterloo, the most murderous battle of the century, and thus be embalmed in the history books. Then a brochure appeared, which caused the blood, shed at Solferino, to flow afresh; one man remembered the thousand men he had attended with the aid of Italian peasant women; he remembered the eyes lighting with gratitude for a sip of water, the smile of thanks for a smoke. Governments still sent men into battle to bleed and die for their country, without providing for them the commonest necessities of life. No attempt was made even to distinguish hospitals from other buildings, and thus houses of mercy were shelled as if they were arsenals of war. This barbarism had survived beyond the mid-nineteenth century, and no voice had cried out against the outrage. The author of the brochure held no official position, but at times the printing-press has magic power to shake the foundations of an ancient evil. The brochure was Dunant's *Un Souvenir de Solferino* (Geneva, 1862).

The detailed accuracy of Dunant's book was impressive; his personal recollections disclosed his sensitive response to suffering; and his con-



cluding suggestions revealed him as one of the major prophets of modern times. Dunant proposed the formation of an international organization before the beginning of hostilities; immunity of the medical and nursing staffs; rapid transportation of injured soldiers from battlefields to hospital; improvement of hospital service; neutralization of the wounded, and extension of the work of this organization to catastrophes, such as epidemics, floods, and fires, in times of peace. Writing as a private individual in the secrecy of his study, Dunant at thirty-four produced a manuscript which had extraordinary results. In his native Geneva, a commission was established to study the author's ideas. The members of the commission consisted of the humanitarian soldier, Guillaume Henri Dufour (1787-1875), commander-in-chief of the Swiss army; the lawyer and professional philanthropist, Gustave Moynier, president of the *Société Gènevoise d'Utilité Publique*; the physicians Louis Appia and Théodore Maunoir; and Dunant.

This commission became the *Comité International de la Croix-Rouge*. These men were the organizers of the Red Cross, but Dunant alone was its originator: his *Un Souvenir de Solferino* was its source book and its watchword was Dunant's statement: "The Committee must be permanent, and constantly inspired by the true spirit of international caritas. The civilized powers must recognize an international and sacred principle for the aid of the wounded." The international gathering at the Palais de l'Athénée in Geneva (1863) was followed by the Geneva Convention (1864), which adopted as its protective symbol a white flag bearing a red cross. Since that day, all men of decency have held that international flag in honor, and the Geneva arm band has been a passport to every field of blood. The Red Cross was the new religion, a religion without superstition, a religion which included all creeds and sects of the brotherhood of pain.

There was a sublimity about Dunant's ideas which suggested the peaks of his native Alps. Among his dreams were the abolition of slavery in America (1858), the humanizing of war (1859), an international society for the revival of the Orient (1866), the International Palestine Society for the formation of a vast colony in a neutralized Palestine with Jewish cooperation (1867), the publication of the International World Library (1867), the neutralization of specified cities to which the wounded could be sent in time of war (1870), the establishment of an international

court of arbitration (1872!), an international society for the protection of prisoners of war (1873), a bureau for the protection of women (1897) and the abolition of war (1897).

Perhaps a man whose soul is swept by such conceptions becomes incapable of routine living, or perhaps Dunant had been so absorbed in the furtherance of the Red Cross that he had neglected his private affairs. The grain mills in Algiers ceased to grind, and Dunant's best friends lost their investments. On one occasion, sitting in the shadows of the church of the Sorbonne, listening to the sermon of a famous priest, Dunant suddenly heard his name mentioned among the saints. A peculiar bankruptcy turned the saint into a sinner. Dunant disappeared from his accustomed haunts; he who had walked with kings could not be found. From time to time inquiries reached Red Cross headquarters at Geneva. "Dunant? We know nothing about him," replied Gustave Moynier, the man-of-method.

In the hospice of Heiden in the canton of Appenzell lived a silent old man. He did not welcome visitors, and there were, indeed, few who thought of entering his cell. The deaconesses gave him food, and kept his enemies away by locking the door. He was safe from the horror of the days when a pavement in Paris had been his bed, when his dinner had been a crust of dry bread which he furtively took out of his pocket. Strange shadows of memory fell upon that bare wall: decorations and diplomas, packed up in boxes . . . the approval of his plan by Louis Napoleon, who founded an empire by a bloody coup d'état and ended it by surrendering his broken sword on a dunghill . . . words of Victor Hugo, who had written so warmly to Dunant . . . the voice of the Queen of Prussia, See, I am wearing your arm band . . . the article by Charles Dickens on *The Man in White* . . . the lengthy interview with the Empress Eugenie . . . so many dinners with ambassadors and warriors and kings, all agreeing with Dunant . . . the Red Cross hailed in nation after nation . . . Dunant, the modern saint . . . Dunant, the thief who lost the savings of his friends . . . Dunant to whom monarchs gave banquets . . . Dunant who hid in the dark alleys of Paris, hungering for a loaf of bread.

It was quiet in the old man's cell, except for the cries of the wounded at Solferino. The battle had occurred a generation ago, and there had been other wars since, but a stranger-in-white at Solferino had written



a book suggesting neutral doctors and nurses without nationality. The world greeted Dunant with acclaim, and the world cast out Dunant in shame. Dunant was misunderstood; there was work for Dunant, but where was he? Was it true that Dunant, the celebrated saint of humanity, was a man who did not pay his debts? Where was Dunant? His enemies said he was not the real Dunant, not the man who wrote *Un Souvenir de Solferino*. The honors in the packed boxes proved that he was the real Dunant. But had not Dunant died, destroyed by the twin infamies of the church and the state? It was in this condition that a Swiss journalist found the old man, and informed the world that Dunant was alive, an inmate of a poorhouse. Red Cross headquarters was embarrassed at this resurrection of the founder, but again the trumpets of fame resounded with the name of Dunant.

The cell in the hospice of Heiden was flooded with testimonials of esteem: an inscribed portrait of Pope Leo XIII, a pension from the dowager empress of Russia, laudatory articles in newspapers and magazines, honorary membership in numerous societies, and gifts to pay off his debts. Then the door of the little cell opened, and when the old man in the black skullcap and long, white beard looked up, he saw the woman who was to bring him back to sanity. It was Bertha von Suttner of Prague, the Austrian field marshal's daughter, celebrated throughout Europe as the apostle of the brotherhood of nations and the author of *Down Arms* (1889); in her capacity of secretary to Alfred Nobel, the master of explosives, she was credited with interesting the discoverer of dynamite in the problems of peace, though the Swedes claim his real teacher in pacifism was Shelley. Bertha von Suttner placed the pages of her monthly magazine (founded 1892), bearing the same title as her book (*Die Waffen Nieder*) at Dunant's disposal. After the silence of years, Dunant began to write again for publication.

One of the most remarkable and beneficent of human documents was dated at Paris (Nov. 27, 1895), written by Alfred Nobel himself without legal assistance. It was the will of the Swedish scientist, and one of its provisions read:

And, finally, one share to the person who shall have done most to promote the Fraternity of Nations and the Abolition or Diminution of Standing Armies and the Formation and Increase of Peace Congresses. . . . I declare it to be my express desire that, in the awarding of prizes, no consideration

whatever be paid to the nationality of the candidates, that is to say, that the most deserving be awarded the prize, whether of Scandinavian origin or not.

When the Nobel Peace Prize was awarded for the first time (1901), it went jointly to Dunant and Frédéric Passy. By an ironic twist of fate, the fortune built on nitroglycerin enriched two old men, one the originator of the Geneva Convention, the other the founder of the first peace society in France. The hand of Bertha von Suttner could be felt in this award.

The pauper Dunant had suddenly become the possessor of wealth, as in the days of his youth. But he had been away too long to think of returning to the world. He had never known an intimate friend, had never loved a woman, and no home of his own awaited his familiar step: Dunant, like Nobel, had no family. He had buried himself in an almshouse, and there the world had found him and honored him. He donated his money to charity, and remained in the hospice of Heiden. There he passed away, at the age of eighty-two (Oct. 31, 1910), as the leaves fell in the little Swiss village.

The work, which he had long ceased to guide, went on without him, though never beyond him, for he had envisioned its future. The Red Cross was the first effective international organization for human welfare in the world, though its originator was too impractical to live in the world. Dunant is the most anonymous of famous men, and countless thousands who have blessed the Red Cross have never heard the name of Dunant. It is a name which will increase in stature with the centuries: the gaudy decorations of kings and the parchments of emperors will be dross, outweighed by the Geneva arm band. On the tablets of humanity will remain an unforgettable epitaph: The Little Gentleman in White, Jean Henry Dunant (1828-1910), the Founder of the Red Cross.

### CLARA BARTON

Sally Stone was seventeen when she wedded Stephen Barton, aged thirty, a New England farmer who had fought in the Indian wars under Mad Anthony Wayne, and whose youthful eyes had seen the British evacuation of Detroit (1796). The Bartons lived in Oxford, Worcester County, Massachusetts, where two boys and two girls were born to them during the first seven years of their marriage. It seemed as if



they would have no more children, for ten years elapsed before the arrival of the baby of the family, Clara Barton (1821-1912). Reared on an isolated farm, without the discipline of classmates and playmates of her own age, the spoiled favorite of the elders, the little brown-eyed daughter grew up in the woods, as shy as a fawn and as willful as a mule. Her father spoke to her about war and battles, and initiated her in military drill; her brother David, whom she had nursed during a long illness, showed her how to tie knots, and how to break untamed colts. The girl, who stopped growing at the age of eleven and was always small, mastered wild horses and rode like a Mexican. Yet she was so bashful that she would not sit at the family table if a guest were present, and so timid that if anyone scolded her, she burst into tears.

At that time, the brothers Orson Squire Fowler and Lorenzo Niles Fowler were the advisers of America on amateness and matrimony ("including important directions and suggestions to lovers and the married concerning the strongest ties and the most momentous relations of life"), human science, natural theology, mental philosophy, civilization, home, country, God, commerce, rights, duties, ethics, functions of organs, tight-lacing, tobacco, alcohol, rewards, punishments, sin, faith, prayer, juvenile- and self-education, sciences, arts, avocations, the perfect life, immorality, and immortality. The fraternal doctors and professors (self-styled) knew all, as the result of their studies in phrenology: ceaseless streams flowed from the Fowlerian pens, their phrenological charts, pamphlets and books competing in American households with the Bible, Webster's Speller, McGuffey's Readers, and Buchan's Domestic Medicine. During a lecture tour the younger Fowler stayed with the Bartons, and of course he was consulted about little Clara's excessive sensitiveness.

Lorenzo examined Clara's head, and his diagnosis has been preserved: "The bump of fear is overdeveloped. It is a characteristic of her nature. Give her something to do, keep her at work, let her forget herself. Never scold her. Encourage her. When she does anything well, give her full credit—compliment her. Throw responsibility on her—when she is old enough, give her a school to teach." This excellent advice was the basis of the lifelong friendship between Clara and the man who understood her bumps; years later, when Lorenzo had established himself in London, Clara was the guest of his family. Clara Barton never knew that

phrenology was a pseudo-science, and that the Fowler brand was tainted with quackery.

At the age of fifteen, instead of going to school, Clara Barton began to teach school. After acquiring experience in district schools, she opened a school in North Oxford, where her brothers ran a mill, and for a decade she directed the education of the villagers and the operatives. Realizing that the teacher herself was in need of education, she took a brief course in the Clinton (N. Y.) Liberal Institute (1851). Miss Barton made her next appearance in Bordentown, New Jersey, at a time when the public-school system was not yet recognized as the cornerstone of democracy. Substantial citizens paid for the education of their children, and resented free schools as pauper schools. Famous American writers lived in Bordentown, but neither the authors nor the authorities of the town concerned themselves with the education of the poor. Miss Barton established the first public school in Bordentown with six boys from the streets; when the number increased to six hundred, and it became necessary to hire an assistant teacher, it was also decided that the enterprise was too large to be in charge of a woman, and a male principal was appointed. Miss Barton promptly resigned, bringing to a conclusion eighteen years of pedagogy. That male principal has long been forgotten, but many years later the school was dedicated as the Clara Barton Memorial School.

Miss Barton now fell a victim to nervous exhaustion. The short-lived but energetic neurologist, George Miller Beard (1839-83) of Connecticut, advanced so convincingly (1879) the concept of nervous exhaustion as a disease of civilization to which Americans are peculiarly liable, that neurasthenia has since been known as the American disease or Beard's disease. Evidently, neurasthenia is the most interesting of diseases, since much of the work that has moved the world has been accomplished by neurasthenics.

The nation's capital, with its hot and steamy summers, has never been considered a health center, and it is strange that a farm-bred woman from the North should have gone there for rest and recuperation; the instinct which guided Miss Barton to Washington, made her the darling of destiny. Through the influence of her congressman (Colonel Alexander De Witt), a place was found in the Patent Office (\$1,400 per annum) for Miss Barton (1854), who thus enjoyed the distinction of being the



first woman clerk in Government Office, Washington, D. C. Discharged during the incompetent presidency of Buchanan, and recalled under Lincoln, she was working in the Patent Office when the Civil War broke out. She resigned her position, for there was something more important to do than file caveats all day.

A regiment from Miss Barton's home state (6th Massachusetts Volunteers), passing through Baltimore (April 19, 1861) on its way to Washington, was attacked by a mob—not only with names, but with sticks and stones—and the soldiers naturally answered bricks with bullets. Thus flowed the earliest blood of the Civil War, on the anniversary of the nobler battle of Lexington. The following day the regiment, itself looking like a mob, straggled into Washington; the sick and wounded were placed in the Old Infirmary, and there was Miss Barton. She proceeded to the Senate Chamber where the regiment was quartered, and standing on the steps to the vice-president's chair, she addressed the soldiers. The Senate was not in session, but she put the Capitol to good use when she distributed clothing and bandages, food and liquor. All this was done on her own initiative, for she had no authority and was subject to no authority: in the first relief field of the Civil War, Miss Barton was the first relief worker. From that time on, Clara Barton made benevolence her business.

Like a true frontiersman who moves on when newcomers invade his neighborhood, Miss Barton left Washington when relief was organized. She had a flair for being the first to arrive; when others crowded upon her, she went elsewhere. In the horror that was Andersonville, she identified the dead, established the first National Cemetery, and over it raised the first American flag. At her own expense she conducted a prolonged search (1865-67) for the eighty thousand missing men of the army, and exhibited unusual ability by tracing a large percentage of them. She was determined, resourceful, fearless: in army camps she walked close to kicking mules, and during battles acted as if she were immune to death.

Bullets made holes in her dresses, and men she was nursing were shot in her arms, spattering her clothes and body with gore. The skill with which she secured, and the promptness with which she distributed, large quantities of supplies, earned for Clara Barton her first national plaudits. On the night of Antietam, a surgeon who had converted an old

farmhouse into a hospital, looked at his last flickering bit of candle, grimly remarking that when its flame was extinguished a thousand wounded and suffering men would lie in darkness. On hearing these words, Miss Barton smiled, though her lips were cracked, her throat parched with smoke and sulphur, and her face a bloody, black smudge. She arose, and brought thirty lanterns to the surgeon, and more candles than he could count. Nearly all the war-nurses were under the supervision of Miss Dix, and the relief-workers were associated with the Soldiers Aid Society, the Sanitary Commission, or the Christian Commission. That was not Miss Barton's way, for she could not take orders or share authority: she was the little lone lady in black silk.

After the restoration of peace, Miss Barton delivered three hundred lectures (1867-68) about the battlefields of the Civil War. Nervous prostration again overwhelmed her, and she claimed that her physicians directed her to go to Europe, to remain three years. Broken in health, she arrived in Geneva, Switzerland (Sept. 1869). A month later, she learned about the Red Cross: Dunant had disappeared, but Gustave Moynier, the man-of-method, the attorney who presided with such precision at meetings, the chairman who knew all the parliamentary rules, called upon the sick American. The permanent president of the International Committee of the Red Cross, accompanied by various members, asked questions, and Clara Barton, for the first and last time in her life, did not know the answers:

They wished to learn if possible why the United States had declined to sign the treaty. Our position was incomprehensible to them. If the treaty had originated with a monarchical government they could see some ground for hesitancy. But it originated in a Republic older than our own. To what did America object, and how could these objections be overcome? They had thought the people of America, with their grand sanitary record, would be the first to appreciate and accept it. I listened in silent wonder to all this recital, and when I did reply it was to say that I had never in America heard of the Convention of Geneva.

Clara Barton lay in an invalid's bed in a foreign land and found her life-work: she knew she would make her country recognize the Convention of Geneva.

The following summer, Miss Barton was still in Switzerland, at Berne, still bedridden. In those days, France was the expression of one man and one woman: Louis Napoleon, who rouged his faded cheeks but could



not hide twenty years of bloodshed and blunders; and the Spanish woman, Eugenie, who said, "Unless there is a war my son will never be emperor." Bismarck accommodated her by editing a telegram from Ems, and his prediction, "It will have the effect of a red rag on the Gallic cock," was proved accurate when France declared war upon Prussia (July 19, 1870). Before the first shot was fired, Louis Appia was at Miss Barton's villa, inviting her to work with the Red Cross, and the military doctor received from the sick woman the tart reply: "In my own time and way." At the outset of the conflict, the Philadelphia physician-dentist who resided in Paris, as the friend of the imperial couple, attending to the oral cavities of the leading royal families of Europe, established the American International Sanitary Committee with himself, of course, as president, and during the siege of Paris (1870-71) organized the American Ambulance: Miss Barton had nothing to do with Thomas Wiltberger Evans or his committee or his ambulance.

The Franco-Prussian War did for Miss Barton what mountain air and thermal baths had been unable to accomplish: it raised her from her sickbed. On the battlefields and in the besieged cities of France, Miss Barton repeated her relief work of the American Civil War. She was on the battlefields of Hagenau, Metz, Strassburg, and in the debacle of Sedan, where Louis Napoleon sat on horseback, with tears streaming down his red-rouged cheeks as there disappeared from before his eyes his whole glittering empire—the gay balls and hunting parties for favored friends, the black pearls and green velvet gowns of the most beautiful woman in Europe—and incidentally, the honor of France. Miss Barton administered relief at Belfort, Woerth, Montbelard, in the Baden hospitals, and in Paris, where she witnessed the fall of the Commune, followed by the widespread massacre of men, women, and children. Everywhere she observed the systematic organization and remarkable effectiveness of the Red Cross, and she promised foreign nations that America would join the Red Cross.

After an absence of four years, Miss Barton returned to her native land (1873), in worse condition than ever. More years of invalidism followed, seemingly fallow years in which she forgot how to walk. As she lay in her nightgown in a sanatorium in the village of Dansville, Livingston County, New York, the best of life appeared to be over. Neurasthenia is a wonderful disease, and Clara Barton, growing old,

was rejuvenating herself with rest, storing up exhaustless energy for glorious years ahead. Miss Barton had written to Geneva that she really did not want the position, but if they had no one else in mind, she would consent to be the head of the American Red Cross. It happened that headquarters in Geneva had no one else in mind. Miss Barton decided she was strong enough to go to Washington (1877), and to present Gustave Moynier's letter to the president of the United States who received it with extreme courtesy, and passed it on to the secretary of state who received it with extreme courtesy, and passed it on to his assistant who received it with extreme courtesy, and passed it on to his assistant and so on. It was an old American game, colloquially known as the run-around, but Clara Barton was not playful.

She studied carefully the chronologic order in which the nations had adhered to the Convention of Geneva: France was the first (Sept. 22, 1864), soon followed by Switzerland (Oct. 1, 1864), Belgium (Oct. 14, 1864), Netherlands (Nov. 29, 1864), Italy (Dec. 4, 1864), Sweden and Norway (Dec. 13, 1864), Denmark (Dec. 15, 1864), Spain (Dec. 15, 1864), and Baden (Dec. 16, 1864); the next year the treaty was adopted by Greece (Jan. 17, 1865), Great Britain (Feb. 18, 1865), Mecklenburg-Schwerin (Mar. 9, 1865), Prussia (June 22, 1865), and Turkey (July 5, 1865); then came Württemberg (June 2, 1866), Hesse Darmstadt (June 22, 1866), Bavaria (June 30, 1866), Austria (July 21, 1866), Portugal (Aug. 9, 1866), and Saxony (Oct. 25, 1866); in the following year, only one more country joined, but it was important, for it was Russia (May 22, 1867); and in less than a year the agreement was signed by the Pontifical States (May 9, 1868).

After an interval, Rumania (Nov. 30, 1874), Persia (Dec. 5, 1874), San Salvador (Dec. 30, 1874), Montenegro (Nov. 29, 1875), Servia (Mar. 24, 1876), Bolivia (Oct. 16, 1879), Chile (Nov. 15, 1879), Argentina Republic (Nov. 25, 1879), and Peru (Apr. 22, 1880) enrolled under the banner of the red cross on a white ground, but the United States held aloof. The Unitarian clergyman, Henry Whitney Bellows (1814-82), who became one of the most celebrated figures of the Civil War when he originated the United States Sanitary Commission, actually founded a society of the Red Cross soon after the restoration of peace. Arguments about Washington's Farewell Address, entangling alliances, Monroe Doctrine, non-intervention, and the Atlantic and Pacific oceans, en-



gulfed our first society of the Red Cross, which withered and perished without a trace in the oxygenless air of American isolationism.

In the 1880s, the most damning epithet that could be applied to a Christian nation was to call it heathen: it was as insulting as impugning the chastity of a woman in those mid-Victorian days. Miss Barton had been passing Moynier's letter around; she took French lessons, and translated the letter herself, and wrote the English version in her copperplate hand; now she was tired of dillydallying. Her prominent nose scented battle, and her big mouth must have been compressed ominously as she issued this challenge *To the President, Congress, and People of the United States* (1881):

My first and greatest endeavor has been to wipe from the scroll of my country's fame the stain of imputed lack of common humanity, to take her out of the roll of barbarism. I said that in 1869 there were twenty-two nations in the compact. There are now thirty-one. . . . If the United States is fortunate and diligent, she may, perhaps, come to stand No. 32 in the roll of civilization and humanity. If not, she will remain where she at present stands, among the barbarians and the heathen.

Where the moderate Bellows had failed, the violent Miss Barton succeeded. The United States was the thirty-second nation to sign (Mar. 1, 1882) the ten articles of the Convention of Geneva, and with the zealotry of a new convert it voted its adhesion to the Additional Articles. The triumphant Miss Barton sent a cablegram to Moynier, notifying him that the United States had at last ratified the treaties of the Red Cross. Moynier congratulated Mademoiselle on her glorious news, adding how happy and proud she must feel at having finally attained her object, thanks to a perseverance which surmounted every obstacle. Moynier, the man-of-method, pointed out certain technical formalities with which the United States must now comply, just a matter of routine for the record, and he concluded by informing Miss Barton that he was sending her a medal. Clara Barton was past sixty when she became the first president and treasurer of the American Red Cross.

Because of the light which it throws on her character, it is necessary to quote the following incident which Miss Barton herself published:

I was young and strong and loved to walk. I had four great wagons loaded with supplies for sick and wounded soldiers coming in the rear, so I decided

I would not get my feet wet, but wait for my wagons and cross in one of them. The soldiers splashed right through in solid ranks, the water being only about a foot deep. Suddenly the captain of a company in the middle of the stream called out to the men— Company, Fours, Left, March! Halt! Right, Dress! Front! Now, boys, there stands Clara Barton! I want you to kneel down in the water on your right knees, and let Miss Barton walk across on your left knees— This order the soldiers instantly obeyed, and I stepped from knee to knee, the soldiers reaching up and holding my hands, and passed dry shod to the other shore.

No compliment, from whatever source, was too extravagant for Miss Barton to publish. In the aftermath of the Ohio floods (1884), Miss Barton found a strange family on the banks of the river. They planted nothing and owned nothing, subsisting on the fish they caught and the floating drift they picked up. Sixteen of them lived under some slanting boards, for they had no other home. Miss Barton observed that they clung to the river, like the muskrat and the beaver, and were washed out with every flood. Miss Barton helped this family, actually changing their mode of life. One of its members, Charley Hunter, could write a little, and Miss Barton playfully called him "the Savant." One day he sent her a letter which she finally deciphered: "We are all doing well. We don't drink or play cards no more. I got the flannel undershirts and drawers and the medicine you sent me. My rhumatis is better. I know now that I have got two friends; one is you and the other is God." Miss Barton's own published comment was as follows: "I was sorry he named me first; I do not think he intended it."

Along the coast of South Carolina, a hurricane and tidal wave in the Sea Islands brought disaster to the colored people (1893). Death carried away thousands in a night, and those who escaped with life lost everything else. According to Admiral Beardslee, whose ships were sunk or wrecked in the whirlwind, some of the Sea Islanders saved themselves amid the boughs of the giant pines and oaks, but many were thrashed to death by the whipping branches, or knocked off into the raging sea below. There was no relief for the survivors until Miss Barton appeared on the scene. She and her assistants distributed food, clothing, medicines, blankets, tools, and advice. Later on in the season, Miss Barton wrote *A Christmas Carol (For my 30,000 Sea Island Friends)*, with the chorus, "Shout, all people; shout and pray." No anthologist included



the poems of Miss Barton in his collection, but they were not lost: Miss Barton treasured them and printed them herself.

Miss Barton loved to work among the Negroes of the South. They called her Miss Red Cross, and went down on their knees before her; they kissed her hands, and touched the hem of her garments; they gazed at her with adoring eyes, and asked if she were really a woman, or an angel from heaven. It was an atmosphere which Miss Barton loved. Naturally, the Sea Islanders were thankful for the help they received from the Red Cross funds, and they wrote letters expressing their undying appreciation. Miss Barton kept these letters and years later published extracts. She begins with a letter signed by three colored women ("We is the committee of the clothing"), addressed as follows: "Miss Clara Barton the Queen of the Red Cross Society."

After one of the Armenian massacres, Clara Barton wrote to her friend Frances Willard: "Alone, bereft, forsaken, sick and heartbroken, without food, raiment or shelter, on the snow-piled mountain sides and along the smoking valleys they wander and linger and perish . . . the angel of disease flaps his black wings like a pall, and in once bright Zeitoun and Marash contagion reigns." It was plainly an instance when the cry of the people was "Help or we perish," and Miss Barton possessed not only the courage to sail for Turkey, but the resourcefulness to gain admission to that inhospitable land. It was an heroic test which she met unflinchingly. The gloomy pro-German spy-surrounded treaty-breaking Abdul-Hamid sat on the throne of Turkey; a despot at home and a liar abroad, for his sponsorship of the Armenian massacres he was called the Great Assassin and the Bloody Sultan. Clara Barton, who had ministered to his victims, accepted from his hands a gorgeous decoration which she gladly added to her collection. And she did not call the sultan any names. Abdul-Hamid and Clara Barton were diplomats. In connection with the Armenian massacres, there was one atrocity for which the sultan was not responsible. Perpetrated by Clara Barton in Constantinople (July 4, 1896), it was a poem (Marmora) whose opening line, "It was twenty and a hundred years, oh blue and rolling sea," is a sample of the rest.

Miss Barton received an abundance of royal jewels, medals, and decorations; she had them photographed and published, obverse and reverse; if the orders contained any descriptive matter, explaining that

Miss Barton was the most wonderful of women, she had them translated and published also. She continually wore the Pansy Pin, with its five petals of amethysts and its dew-drop pearl in the center, not because it was a priceless jewel, but because it permitted her to say so many times: "It was given to me by my very dear friend, the Grand Duchess of Baden." Even conservatives found it difficult to praise the royalty of Russia, but it was easy enough for Miss Barton. Nicholas II sent her a ribbon, and later Miss Barton gave Nicholas II this charming testimonial: "The Czar is young and handsome, an educated, refined, kind-hearted gentleman. I know him." She met the Czar, and he was nice to her. That was the yardstick by which Miss Barton measured everything. The ceaseless line of exiles on the long road to Siberia was not as important as the beautiful ribbon.

Before, during, and after the Spanish-American War, Miss Barton did personal field work in Cuba, where she had gone to aid the starving *reconcentrados*. Destiny took good care of her: she visited the *Maine*, and the next day occurred the never-solved mystery of the explosion of the battleship, which precipitated the inevitable war. It was a war in which bacilli were vastly more devastating than bullets. In command of the *State of Texas* and the little steamer *Red Cross*, Miss Barton distributed drugs, dressings, delicacies, and, most precious of all, ice—a gift from the gods in the fever-infested tropics. After the surrender of Santiago, her ship was the first to enter the harbor. She was the first to bring relief to Siboney, and so critical a man as Nicholas Senn, chief surgeon of U. S. Volunteers, testified that in an army wagon she went to the front, several miles distant, over one of the roughest roads imaginable, extending the work of the Red Cross to the very trenches. Miss Barton took it all as a matter of course, and gave no heed to the calendar which said she was in her seventy-seventh year.

From Havana, Miss Barton sent the cable, "I am with the wounded," which was supposed to electrify all America. A minor poet wrote some verses on the theme, "I am with the wounded," and a religious magazine printed a hospital scene: Clara Barton, clasping her hands in agonized tenderness is standing at the foot of the bed, looking at a soldier whose head is bandaged: the soldier is gazing in grateful adoration at the angel of the battlefield. Clara Barton publicized the poem and the picture, confident that any favorable comment about herself was news



of national importance. The famous cable revealed the extraordinary egoism of the old woman, but it did not detract from her remarkable abilities as a relief administrator. Nevertheless, the nursing aspect of the Red Cross remained inadequate during Miss Barton's regime: from the Spanish-American War emerged Anita Newcomb McGee's creation, the Army Nurse Corps; and it became the life-work of Jane Arminda Delano to make Red Cross Nursing the reserve of the Army Nurse Corps. This cooperation could not be consummated until the individualistic Miss Barton was eliminated.

At the conclusion of the Spanish-American War, Miss Barton issued a large book on *The Red Cross* (1898). This useful work is a bibliographer's nightmare, for the identical volume contains different subtitles and publishers, which are given variously as American National Red Cross (Washington), The International Society (New York), American Historical Press (no place), and there may be others. The front of the title-page varied, but, on the back, one line was constant: "Copyright, 1898, by Clara Barton." In this book, the name of Clara Barton appears thrice on the binding, twenty-five times before the first chapter is reached, and hundreds of times from cover to cover. Miss Barton herself spoke of "poor little me," and said: "I am the most timid woman in the world."

Miss Barton, in her book, frequently refers to Gustave Moynier, the perennial president of the International Committee, from whose lips she first heard of the Red Cross. Clara Barton was not afraid of Gustave Moynier: he was not a creator, he was a glorified chairman. There was one name that Miss Barton feared, and hated to pronounce: Dunant! The name of Dunant must be suppressed. Dunant, the creator of the Red Cross, the one name that could overshadow the name of Clara Barton. She did not rebuke her followers when they referred to her as the founder of the Red Cross; she loved it when the colored children of the South called her Miss Red Cross. Yet she knew who had originated the Red Cross: it was not Clara Barton. When an allusion to Dunant could not be avoided, instead of mentioning his name, it was better to speak of "a kindly Swiss gentleman," or to refer poetically to "the first filaments spun in the heart of a solitary traveller." In this manner she gave Dunant credit, and obscured him in anonymity. Beginning with

a centerpiece of Gustave Moynier, there are many portraits in Miss Barton's book on the Red Cross, but one portrait is missing: the portrait of Dunant, founder of the Red Cross.

Clara Barton used to say: "The only picture of myself that I have cared anything about at all is the one taken at the time of the Civil War, in which I am represented in the uniform of a nurse. If my friends had let me have my way, I would never have had another picture taken." Evidently, Miss Barton's friends did not let her have her way, for there are enough portraits of her to have satisfied a popular actress. In this book on the Red Cross, supposed to be the history of an international movement and not a personal narrative, Clara Barton inserts a portrait-gallery of Clara Barton. Of course the frontispiece is Clara Barton, beneath which is the caption, "taken about 1875." In this instance, the much-abused "about" is stretched ten years: the portrait was taken, not in 1875, but at the climax of the Civil War in 1865. Miss Barton was then wearing a cameo which came out white in the picture; it did not contain a red cross in its center, as Miss Barton had not yet heard of the Red Cross. But when Miss Barton pretended that the 1865 portrait was "taken about 1875," she had a red cross painted on the ivory pin.

Miss Barton never acquired the principles of modern nursing. Miss Barton was familiar with the domestic variety of nursing which in the emergency of the Civil War she saw applied to military needs. In the Franco-Prussian War, Miss Barton observed the German system of nursing, which ever afterward remained her ideal. The faithful deaconesses and the aristocratic volunteers alike impressed her favorably. Unaware of the training schools on the Nightingale system which were opening up all over America, she continued to want well-bred volunteers who had perhaps taken a brief course in nursing. During her presidency of the American Red Cross, nurses wrote to Miss Barton asking her how they could join: Miss Barton was a prolific letter writer, but these correspondents received no reply.

Miss Barton never cared to reveal to the American people the source of her income. From her father she inherited practically nothing, her annual salary as a schoolteacher in Bordentown was \$300, and her yearly pay during her clerkship in Washington was \$1,400. After the Civil War she delivered three hundred lectures on her battlefield experiences at \$100 a lecture, but \$30,000 could not last forever. For many years,



Miss Barton was an invalid without any earning capacity. Where did her money come from? Her own attorney was once quizzing her on this subject, and Miss Barton innocently asked: "Why should I tell you?" Miss Barton hinted that there had been a sweetheart who went to California; he did not return, but left to Miss Barton a fortune in gold dust. She considered this legacy too sacred to spend upon herself, and used it in tracing missing soldiers. She was regarded as a woman of wealth: she owned real estate in Maryland and in Washington, and large amounts of railroad stock. She received no salary for serving as president of the American Red Cross. The mystery remained: how did she make a living? Miss Barton could keep a secret, for she never told.

Miss Barton was expert in business methods, a statesman in philanthropy. Officially she was president and treasurer of the American Red Cross, but in reality was also its field agent, personnel director, general manager, and commander-in-chief. She had founded the American Red Cross, and she ran it as she thought it should be run. She slaved for it, risked her health for it, lived for it, would have died for it. Feeling that Clara Barton was the Red Cross, and the Red Cross was Clara Barton, it followed that her accounting was unorthodox. Under the circumstances it was inevitable that one day a woman should arise and criticize Miss Barton's bookkeeping. Thirty-one charges were brought against her, including "the dishonest appropriation of relief funds." A distinguished committee was appointed to investigate Miss Barton, while an auditor from the U. S. Treasury inspected her books. The committee met three times and disbanded abruptly, without a report, for a surprising thing occurred: Miss Barton resigned.

Mother Bickerdyke, in the days of the Civil War, had also been careless in accounting for public funds, but with this vital difference: Mother spent more for the soldiers than she received, and kept nothing for herself. Mother had no houses, no securities in secret vaults, no money in the bank. It was nerve-racking to go through Mother's audit-defying books, but the conclusion was plain: Mother gave every dollar away with all her heart. The situation was different with Clara Barton. At the time of the Russian famine, when Miss Barton was in control of the American Red Cross, the records show \$45,000 received for relief, and not more than \$15,000 expended for relief. What became of the balance? Did Miss Barton use it to buy peaches and cream? Misappro-

priation is a sinister word in connection with public funds. Large checks were contributed to the Red Cross in Clara Barton's name, and she identified herself so closely with the Red Cross that she could not differentiate between her organization and herself. Moreover, her services were beyond price. From the legal viewpoint, it must be admitted that Miss Barton was arbitrary ("Why should I tell you?"); yet it sounds like blasphemy to charge that her bank account increased with every disaster.<sup>1</sup>

Miss Barton, mother of the American Red Cross (which she called "my little nursling"), was deeply wounded by the investigation. She, who had lived for years on an intoxicating diet of applause, found suspicion a cold dessert. She was afraid to open a newspaper, for the press which had long chanted hosanna to the name of Clara Barton, now barked a nation's mistrust. It seemed to the stricken old woman that all America was against her, and she could not remain in her native land; she packed her belongings, and determined to escape to a foreign country.

Where could she go, and still carry on her work? Mexico had not yet organized a Red Cross: she would go to Mexico. She wrote to one of the most worshipful of her devotees, Charles Sumner Young, imploring him to take her to Mexico. She wanted him to inquire of the Mexican authorities if a woman who could not live in her own country, could find a home in theirs; she asked her disciple, in the goodness of his heart, to "hold the gate open to show me a mule-track to some little mountain-nook." Miss Barton always dramatized herself, even when she was in trouble. She requested the recipient of the letter to burn it as soon as he read it; he preserved it in a safe-deposit box in Los Angeles, which is what Miss Barton expected him to do.

<sup>1</sup> Specific instances of Miss Barton's misuse of Red Cross funds are given in the authoritative work of Mabel Thorp Boardman (*Under the Red Cross Flag at Home and Abroad*, pp. 97-98); for example: "certain moneys contributed for this famine relief [Russian famine] were deposited in western banks and a portion expended in the purchase and improvement of a farm . . . The year following the Johnstown disaster, nearly thirty thousand dollars' worth of land was purchased in Washington, the titles of which stood in the personal name of the president of the association." One of the most ardent of Bartonites, the Reverend Percy Harold Epler (*The Life of Clara Barton*, pp. 329-30), thus dismisses the matter: "The only wonder is that she could keep accounts at all . . . We can grow hundreds of thousands of bookkeepers, but of such national heroines, there is but one. In the perspective of history, where little things grow small and big things large, the national verdict for Clara Barton will be one of endless love and pride." This is correct enough, but evidently Miss Barton took the money.



Calmer counsel prevailed, and Miss Barton unpacked her trunks: she did not go to Mexico, but remained in her Maryland home at Glen Echo, outside Washington. She resigned from the Red Cross (June 16, 1904). It was a bitter humiliation for her to relinquish the reins of power, yet it was the best thing that could have happened to the Red Cross. Free at last from those dominating hands which saved pieces of string and ironed out wrapping-paper, which wrote its literature in prose and poetry, and controlled every act of the organization at home and abroad, the American Red Cross could begin to develop along modern lines. During the twenty-three years of her presidency, the American Red Cross expended a total of \$2,557,025: in a single subsequent year, in administering relief to the victims of the flood of the Ohio-Mississippi Valley, it expended more than \$25,000,000. With the departure of Miss Barton a new era dawned for the American Red Cross.

Miss Barton was in her eighty-third year when she stepped down from the presidency of the American Red Cross. Mabel Thorp Boardman had urged her to accept the honorary presidency for life and an annuity (\$2,500), but Miss Barton was not interested in shadows. Those capable hands needed to wield power, and for the first time in years those hands had nothing to do. She had mothered the American Red Cross, nursed it, raised it from helpless infancy to its present strength. She was its first representative in Geneva (1884): knowing that no other could be appointed, she pretended modesty and pleaded illness, but Frelinghuysen, the secretary of state, saw through her, and informed her, "All the country knows what you have done and is more than satisfied. Regarding your illness, you have had too much fresh water, Miss Barton, I recommend salt and shall appoint you." At subsequent International Red Cross conferences, only Miss Barton, of course, had been the American representative: at Karlsruhe (1887), Rome (1890), Vienna (1897), and St. Petersburg (1902). Clara Barton was the Red Cross, and the Red Cross was Clara Barton. Now the ungrateful child denied her: Miss Barton was bewildered and felt betrayed.

For a brief time she was idle, then the old fighting spirit came back. The Red Cross had tried to destroy her, but she would destroy the Red Cross. As energetic as ever, with distinguished persons still loyal to her, she would show the Red Cross she was far from finished. Many echoed the words of the commanding general of the United States army,

Nelson Appleton Miles: "Clara Barton is the greatest humanitarian the world has ever known." In all modesty, thought Clara Barton, nothing less could be said. Establishing her headquarters at Boston, gathering around her an advisory board of generals, governors, and physicians, she founded the National First Aid Association of America. She had borne the burden of the Red Cross in the heat of the battle, and now strange hands had snatched her creation from her. She would raise up a rival which would surpass the Red Cross: her answer was the National First Aid Association of America. She had been known as the Mother of the Red Cross: now let her be known as the Mother of First Aid.

Clara Barton issued a manifesto (1905):

The unerring records affirm that on Christmas day of 1821, eighty-four years ago, I commenced this earthly life; still, by the blessing of God I am strong and well, knowing neither illness nor fatigue, disability nor despondency [forgotten were the long years of neurasthenia], and take the privilege of bringing to you an outline of my later work. . . . The First Aid will become time-honored in America, for it has come to stay. Its character is broad and firm, its title clear; and although young its organization is complete [she was the President]. It has its own characteristics, in keeping with its motives—neither ambition, self-seeking, nor vainglory, but good-will, helpfulness, kindness, the spirit of Him who gave His life for others, whose example we seek to follow, and whose blessed birth was God's great Christmas gift to the world.

Miss Barton knew, and had the uneasy feeling that others knew, she had not founded the Red Cross. It was essential, therefore, that she be known as the founder of First Aid. Unfortunately, the facts were against her. In the days when Elizabeth Christophers Hobson (Mrs. Joseph Hobson) was floundering with the training of nurses, of which she knew nothing, and yet out of which grew the Bellevue School of Nursing, she naturally fell into correspondence with William Rathbone VI (1819-1902), hereditary philanthropist of Liverpool, steadfast donor of flowers to Florence Nightingale, and father of modern district nursing. Some years later, Rathbone mailed to Mrs. Hobson a pamphlet about the Saint John Ambulance Association of England, in which the living descendants of the medieval Order of the Knights of Saint John of Jerusalem discussed what should be done in accidents and other emergencies before the doctor comes: What should you do, and what should you not do, when someone faints? What is the first thing to do in a case of poison-



ing? What is the emergency treatment for burns? What are the common symptoms of fracture? How would you carry an injured man who weighs two hundred pounds? How would you revive an individual apparently drowned? How would you keep a wounded person from bleeding to death? It was a wonderful, live-saving idea. Mrs. Hobson was deeply interested.

The hospital committee of the State Charities Aid Association appointed a special committee to organize the Saint John Ambulance Association of America. Mrs. Hobson was not in favor of the name, believing that it would not be understood in this country. The society butterfly who had developed into a profoundly useful committeewoman, said: "Let us take, instead, a name which will describe what we mean to do. Let us call ourselves First Aid to the Injured." Mrs. Hobson's friends looked at her with unconcealed admiration, and a suggestion of such inspiration was accepted with applause (Dec. 8, 1881). After the first report (1882), John B. Pine read a paper on "First Aid to the Injured" (1883), Bowditch Morton wrote *Handbook of First Aid to the Injured* (New York, 1884), and, by this time, the Society for Instruction in First Aid to the Injured was of national importance. It antedated, by more than twenty years, the National First Aid Association of America (1905), organized by Clara Barton. Chronology again foiled Miss Barton. Worse was to follow. In Miss Barton's lifetime, there was founded the First Aid Department of the American Red Cross (1910), and ever since, First Aid has been the symbol of the Red Cross. The Red Cross was everywhere; always, the Red Cross was in Clara Barton's way.

In the year that the Boston Medical Library opened, there was printed in Boston an anti-medical book, ungrammatical and incomprehensible, entitled *Science and Health* (1875). Its author was a character of unusual forcefulness, but a definitely psychopathic personality, named Mary Morse Baker Glover Patterson Eddy (1821-1910). Mrs. Eddy's obsessions regarding metaphysical arsenic and mesmeric poison ("After a certain amount of mesmeric poison has been administered, it cannot be averted. No power of mind can resist it."), and her morbid fear of Malicious Animal Magnetism, caused her to stage the last trial for witchcraft in Salem (1878). In a study of Clara Barton, the most celebrated representative of nursing in America, it is necessary to know her reaction to Mrs. Eddy, who affirmed that physical nursing is a sin of materia

medica, since the material body is a delusion and one cannot nurse the nonexistent.<sup>1</sup>

There were marked similarities between these ladies: descendants of seventeenth-century English settlers in Massachusetts, each was born, in the same year, on a New England farm; each was the youngest child in the family; each lacked formal education; each was subject to long periods of sickness; each became conspicuous only after the menopause, and each reached extreme old age fighting to the last to retain power over their organizations. From middle life on, each cultivated a set smile of studied benevolence, which made their wrinkles remarkably alike. There could be no point of contact between their work, since the Red Cross was founded on the recognition of pain and suffering, while Christian Science denied their materiality. Yet Clara Barton was sufficiently muddleheaded to attend Christian Science meetings for some years, and there was only one reason why she did not join the sect: being a Christian Scientist meant being subordinate to Mrs. Eddy, an impossible situation for Clara Barton who could function only as a dictator. These two ladies understood each other very well.

Mrs. Eddy, who seldom praised a woman, paid the following tribute:

Miss Clara Barton dipped her pen in my heart, and traced its emotions, motives and objects. Then lifting the curtain of mortal mind, she depicted its rooms, guests, standing and seating capacity, and therefore gave her discovery to the press. Now, if Miss Barton were not a venerable soldier, patriot, philanthropist, moralist and stateswoman, I should shrink from such salient praise, but in consideration of all that Miss Barton really is, and knowing that she can bear the blame which may follow said description of her soul visit, I will say Amen, so be it.

What all this means is a mystery, since coherence is not an attribute of the psychopathic mind, but it seems to have been intended as a rare compliment.

In return, Clara Barton wrote in her diary (Dec. 6, 1910):

More particulars concerning the passing of Mrs. Eddy. All so quiet, correct—no form, no excitement, no mourning; all peaceful, thoughtful, proper. What a lesson she has taught the world, and what faithful, apt scholars she has taught and trained! The greatest woman of all; her life a signal triumph

<sup>1</sup> Mrs. Eddy's copious writings are full substantiation of the statements in the text. The biographies of Mrs. Eddy by Georgine Milmine (1909) and Edwin Franden Dakin (1929), based on unimpeachable documents. See also the article by Allen Johnson (*Dictionary of American Biography*, 1931) and the chapter by Stefan Zweig (*Mental Healers*, 1932).



and her death the greatest of all. No criticisms now, no light comments. Her followers bow in meek submission and her foes stand rebuked. There is no such person left, no such mind, no such ability. Long ago I said she was our greatest living woman; I now say she is our greatest dead.

The author of these words may have been entitled to her opinion, but it should have disqualified her as the leader of American nurses. A Christian Science nurse is an anomaly, just as a Christian Science hospital would be a chimera.

With the cry, "Let me go, let me go," Clara Barton passed away in her ninety-first year (Apr. 12, 1912). While the metropolitan press was more restrained, thousands of country newspapers hailed her as the greatest humanitarian that the world had ever known. Services were held in her home in Glen Echo, Maryland, before the departure of the body for burial in its birthplace, Oxford, Massachusetts. The funeral ceremonies were held in the town's Union Memorial Building, whose stage was draped with American flags and banked with lilies and roses. A multitude of mourners passed her bier, and gazed through the glass plate of the flower-covered casket for their last look at Clara Barton. The gallery of the hall was crowded with schoolchildren and their teachers; several members of the clergy were present; old soldiers, some on crutches, whispered their remembrances of her from the days of the Civil War; the younger soldiers of the Spanish-American War recalled her career in Cuba. Various organizations were officially represented: Daughters of the American Revolution, Grand Army of the Republic, Spanish War Veterans, Woman's Relief Corps; there were Clara Barton Chapters and Clara Barton Tents of other organizations. The most prominent floral design, in the center of the stage, was a red cross of carnations. There was one omission: the American Red Cross sent no representative.

Some years later, the request of over a million petitioners for a memorial tablet to Clara Barton in the Red Cross Building at Washington was not granted (1916). The efforts of her admirers to have her bust placed in the Hall of Fame have thus far been frustrated by the negation of National Red Cross Headquarters ("Certain policies make it impossible to pursue this subject any further at the present time"). However, the selections that have been made, have been so strikingly biased in several instances that the inclusion of Clara Barton would add distinction to

the peculiar conglomeration in the semi-circular colonnade on the campus of New York University. Clara Barton's self-esteem was inordinate, her possessive sense was overdeveloped, and she was a bad bookkeeper, but egotism does not obliterate achievements.

Clara Barton inaugurated the public-school system in Bordentown, New Jersey, thus setting in motion free education in the Garden State (1852-54); gave relief at the Old Infirmary in Washington to the soldiers wounded by the Baltimore mob at the outset of the Civil War (1861); continued her relief work at Cedar Mountain, Chantilly, Antietam, Fredericksburg (1862); at Folly Island, Morris Island, and down in Charleston, South Carolina (1863); on the battlefields of The Wilderness, Spottsylvania, Petersburg Mine, Deep Bottom (1864); and during the Richmond Campaign and at the Annapolis Hospital (1865); established on the bloody quagmire of Andersonville, Georgia, the earliest national cemetery (1865); furnished relief on the battlefields of the Franco-Prussian War, and succored the besieged city of Paris (1870-71).

After founding the American Red Cross (1881), she brought relief, frequently in person, to the victims of the forest fire in Michigan (1881), the floods of the Mississippi (1882-83), the Balkan War (1883), the Ohio and Mississippi catastrophe (1884), the famine in Texas (1885), the earthquake in Charleston (1886), the cyclone in Illinois (1886), the yellow fever in Florida (1888), the overwhelming and still-remembered Johnstown flood (1889), the famine in Russia (1892), the cyclone in Iowa (1893), the hurricane and tidal waves in South Carolina (1893), and to the survivors of the Armenian massacres in Turkey and Asia Minor (1896); astonished all beholders by her effectiveness in the Spanish-American War (1898), and at the age of eighty-four organized and actively directed the National First Aid Association of America (1905).

Such accomplishments, persistently advertised by their author, made the farm girl a world-figure. The bells of fame will not cease to ring out the name of Clara Barton.



## XII

### Training the American Nurse



#### FIRST SCHOOL OF NURSING IN AMERICA

WOMAN'S MEDICAL COLLEGE. In the mid-nineteenth century, it was so difficult for a woman to study medicine in America, that a Philadelphia group fitted up a few rooms in the rear of 627 Arch Street; they incorporated (March 11, 1850) and called these rooms the Female Medical College of Pennsylvania, later changing the name to the Woman's Medical College of Pennsylvania. Among the eight graduates at the first commencement (1852), was Ann Preston, soon to be elected professor of physiology, and subsequently to become the dean of the faculty. The facilities of the college were pitiful, nevertheless the idea was important: it was the world's first college organized for the medical education of women.

ANN PRESTON. The action of the Philadelphia County Medical Society in condemning women physicians because of "their delicate organization and predominance of the nervous system," elicited from the pen of Ann Preston a reply which concluded with the passage:

On behalf of a little band of true-hearted young women who are just entering the profession, and from whose pathway we fain would see annoyance and impediments removed, we must protest, in the sacred name of our common humanity, against the injustice which places difficulties in our way, not because we are ignorant and pretentious, or incompetent, or unmindful of the code of medical or Christian ethics, but because we are women.

Ann Preston, of Quaker forbears, small in size, her frail body crippled by rheumatism, possessed a fighting soul.

COLLEGE WITHOUT CLINICS. Several years before Ann Preston wrote her ever-memorable reply, she realized her college was hopelessly handicapped: there was no hospital in the city where its students were certain to receive clinical instruction. In the formative period of Philadelphia's second medical school, William Potts Dewees of the older University of Pennsylvania, loftily remarked, flicking the dust from his high hat, "It won't do for my colleagues or myself to recognize the graduates of the Jefferson Medical College." At last, however, the rival schools clasped hands: they united in signing a resolution against the attendance of women in the clinics. At a later date, so eminent a surgeon as David Hayes Agnew resigned from the Pennsylvania Hospital rather than give surgical instruction to female students.

WOMAN'S HOSPITAL OF PHILADELPHIA. In this hostile atmosphere, there occurred an incident over which the women made an awful fuss: visiting the wards of Old Blockley, Ann Preston's students were suddenly confronted by a male patient, stark naked. (Thirty years later, Mary Putnam Jacobi indignantly described it as "a singularly brutal incident.") The stratagem was successful: women students disappeared from Old Blockley.

Ann Preston followed an ancient custom of devoted women: she went through the streets of the city, and along the roads of the suburbs, and knocked upon the doors of the wealthy, begging alms for her hospital. The governor of the state signed a charter with a three-fold purpose: "That the object shall be to establish in the City of Philadelphia, a hospital for the treatment of diseases of women and children, and for obstetrical cases; furnishing at the same time, clinical instruction to women engaged in the study of medicine; and for the practical training of nurses." Ann Preston founded the Woman's Hospital of Philadelphia in a dwelling-house on North College Avenue, and here the first patient was admitted (Dec. 16, 1861).

Thus a prank, intended to humiliate the students of the Woman's Medical College, was the unwitting father of the Woman's Hospital.

THE NEED FOR NURSES. An early report of the hospital contains the statement:

It was one of the important objects in the foundation of this institution to furnish improved facilities for the training of a superior class of nurses. Al-



though but little has yet been done in this department, yet the need of such is so vital, and so deeply felt in the community, that we cannot but earnestly hope the time is near when many intelligent, benevolent, but conscientious women will be educated for this responsible office, as a profession scarcely second in importance to that of the physician.

To stimulate interest, Doctor Preston delivered a public lecture on "Nursing the Sick and the Training of Nurses" (1862), announcing that Doctor Cleveland would "give a short course of instruction to ladies generally, as well as to those who may incline to make the care of the sick a business, upon the practical art of nursing."

TRAINING SCHOOL OF THE WOMAN'S HOSPITAL. Emmeline Horton Cleveland of Ashford, Connecticut, a graduate (1853) of Oberlin College of Ohio (America's first coeducational college), an alumna (1855) of the Woman's Medical College of Pennsylvania, and a graduate (1860) of the Paris Maternité, where she carried off five prizes, was professor of anatomy at the college and the first resident physician of the hospital. Aside from domestic duties and academic responsibilities, she was house-keeper of the college and baker to its boarding students: she passed from the lecture hall to the hospital beds, and hastened from the supply-room to the oven. Her brief course on nursing was given in what has been called "the first known chartered school for nurses in the United States" (1863).

The curriculum for the training of nurses in the Woman's Hospital covered a period of six months, and there was supposed to be a different teacher for each branch: lectures in surgery, general practice of medicine, obstetrics, preparation of poultices and plasters, and dietary instruction in the methods of cooking. The lectures were to continue for four months, and after the students had attended patients for two months more, they were to receive a diploma. A provision—introduced by a male member of the medical board—was fatal: it specified that the student nurses were to do such work as would "do away with the necessity for chambermaids." Women had done enough of that ever since houses were invented, and it was not tactful to emphasize it in connection with a training school. It seemed impossible to obtain ladies as nurses.

Ann Preston (1813-72) and Emmeline Horton Cleveland (1829-78)

wrought together during life, and by request of the latter as she lay dying of consumption, they sleep side by side in Fair Hill Cemetery. They occupy an honored place among the pioneer medical women of America. Their significance in the history of nursing is due to their early advocacy of the training of nurses: their belief, that they had established a training school for nurses, was one of the educational errors of the 1860s. Yet this first, faltering step in the darkness was a forward step that foretold the coming dawn. The school struggled for six years before awarding its first diploma, after a few months of instruction, to Harriet Newton Phillips (1869). It is startling to recall that twenty years separated the foundation of the training school and the publication of the item: "A watch was purchased to be used by the nurses in taking the pulse rate." In that year, however, the hospital built the first nurses' dormitory in the United States, and among the graduates of the school was Elizabeth McKechnie: she was the first trained nurse who went to China, and she worked for years in the seaport of Shanghai.

### MEDICAL MANIFESTO FOR NURSING

In the pleasant month of May (1869), when the American Medical Association met at New Orleans, a paper was read under the title, "Remarks on the Training of Nurses." The author could not be present, but every man knew his name—Samuel David Gross, the Pennsylvania Dutch farm boy who had learned English, in his adolescence, as a foreign language, and yet became the most facile of medical authors and the leading American surgeon of his time. Gross, himself, read his paper before the Pennsylvania State Medical Society, and briefly mentioned it in his *Autobiography* (Vol I, p. 144): "The paper attracted much attention, as it was the first ever published on that subject in the United States." In reading the tribute to Catholic nursing, it should be remembered that the author belonged to a Lutheran environment; and in reading the condemnation of male nurses, it should be remembered that he referred to the untrained male attendants of the 1860s. The essence of the pioneer paper is found in the five following extracts:

1. The establishment of schools for the education of nurses, for private and public purposes, is a desideratum which has long been keenly felt in this



country, both by the medical profession and by the people at large. That this want should not have long ago been supplied is a curious anomaly in the history of human enterprise and of Christian charity, well calculated to cause surprise, if not positive astonishment. Considering the wonderful mental and physical activity of the age in which we live, and the numerous expedients that have been devised for the improvement of the comfort and happiness of our fellow-beings, it is remarkable that the subject in question should have hitherto been so singularly neglected by all denominations of Christians, except the Catholic, whose noble deeds in preparing nurses for the sick and infirm of their own church reflect so much credit upon their charity and philanthropy.

2. The subject of nursing possesses a deep national interest. It personally concerns every human being, of whatever age, rank, or condition in life—alike the rich man in his palatial residence, the mechanic in his cottage, and the peasant in his humble hovel. All are alike intimately interested in its faithful administration and in its final issue. It is perhaps fortunate that the mortality occasioned by bad nursing cannot be properly estimated by those more immediately affected by it, as a knowledge of it would entail upon them an immeasurable amount of misery and mental anguish.

3. Male nurses are everywhere notoriously bad and incompetent. Few, even in our large towns and cities, are qualified for their business. Drunkenness and male nursing are almost synonymous terms in the experience of the American physician. Even in lunatic asylums, where one might suppose that male nurses were, from the boisterous and unmanageable nature of many of the inmates, perfectly indispensable, women are, it would seem, better fitted to calm and soothe the irritated mind and to maintain discipline than men. It has been ascertained that the mortality of male lunatics in asylums is nearly one-third greater than that of female lunatics: that the deaths are most numerous when nursing is at its point of greatest relaxation; and that the presence of female nurses in male wards is much more effective in restraining the outbursts of violence, abusive language, and offensive habits than of male nurses.

4. The Committee [Gross himself was the Committee] have entered into these historical details with a view of showing how little the Protestant church has as yet accomplished in this important field of human enterprise and Christian benevolence. In this country, so replete in energy and progress, and so thoroughly alive to all the wants of a great people, the ground lies literally fallow, hardly a furrow having been drawn to serve as a landmark to arrest public attention. It will be difficult, half a century hence, to account for the utter apathy that has hitherto existed upon this subject; to find a reason why in a country and in an age which have provided a remedy for almost every other necessity, this alone should have been so sadly overlooked and neglected.

5. Taking, then, all these circumstances into consideration—the promotion of health and comfort, the saving of life and money, and the improvement of the moral and religious condition of the sick—the Committee would respectfully urge upon the medical profession and the country at large the absolute necessity of employing none but well-trained nurses both in public institutions and private families. It is believed that such an arrangement is demanded by the interests alike of society and of individuals, and it may be boldly asserted

that the time for its accomplishment is at hand. The late war made thousands of widows, and doomed many thousands of young women to perpetual celibacy, who, in consequence of their straitened circumstances, are ready to enter upon this good work, and devote themselves, heart and soul, to its behests.

Aside from the fact that the author had just passed the grand climacteric of the male, and considering the period in which the paper was written, it was a remarkably progressive document—the first important document in the history of American nursing. Professor Gross, genial and shrewd, versatile and practical-minded, in his one contribution to nursing advanced beyond his colleagues. His suggestion, “That every large and well-organized hospital should have a school for the training of nurses,” and his pronouncement, “Nursing, in its more exalted sense, is as much of an art and a science as medicine,” were daring thoughts in their day. The Grossian manifesto, an alarm bell ringing throughout the land, though long muffled by misunderstanding, may be regarded as both the epilogue to the old nursing in America and the foreword to the new.

## FIRST SCHOOL OF NURSING IN NEW ENGLAND

THE NAME OF ZAKRZEWSKA. The life of Marie Elisabeth Zakrzewska (1829-1902), which began in Berlin and ended in Boston, was a battle with poverty, prejudice, and the intricacies of the English language. She could never understand why Americans found difficulties in pronouncing the name of Zakrzewska, though she herself hissed when she said Miss Smith. She did not realize that her nickname of Doc Zak was due not only to affection but to convenience. She exemplified the phrase “poor, but proud,” for when the descendants of the *Mayflower*, who were numerous in Boston, seemed dubious over her Gypsy-Polish-German blood, she calmed their fears by reminding them that the name of Zakrzewska dated from A.D. 911, which made 1620 a parvenu.

Zakrzewska had been *accoucheuse en chef* at the Royal Hospital Charité of Berlin, where she had trouble with the authorities, which was a natural condition for her; after coming to America (1853), she managed to graduate in medicine at the Cleveland Medical College (1856), though she could not answer the questions in English. In the years ahead, poor and in ill-health, and overtaken by tragedy at the



most inopportune moment, she was the first resident physician, New York Infirmary for Women and Children (1857); professor of obstetrics and diseases of women and children, New England Female Medical College, Boston (1859); founder and attending physician, New England Hospital for Women and Children, Boston (1862). For the following forty years, she was one of the most useful women in America.

Zakrzewska not only fought prejudices, but had a few of her own. Her denunciation of the novels of Tolstoy was approved by Boston, which has been censoring books since the days of Increase Mather. The younger William Lloyd Garrison described the unorthodoxy of Zakrzewska:

She was a woman of decided opinions and the frankest speech, a circumstance which gave zest and animation to any group in which she mingled. She held firmly to the conviction that personal consciousness ends with death; that so-called spiritual communications are a delusion; that prohibition laws infringe upon individual rights; that homeopathy has no claim to science; and that armed resistance to tyrants is justifiable. My father held diametrically opposite views, but as both were believers in the utmost freedom of speech, the social clash of arms never engendered a moment's ill feeling. They were closely united upon the questions of anti-slavery and woman's rights, and they were drawn by a common impulse to progressive and philanthropic movements.

SUSAN DIMOCK. A few years after Zakrzewska established the New England Hospital, that bleak little building with the empty treasury was brightened by the presence of a young girl from North Carolina, named Susan Dimock (1847-75). She studied medicine in the hospital for two years (1866-67), and then finding that American democracy did not include the rights of women to medical education, went abroad to complete her course. She was the first American girl to graduate in medicine at the University of Zurich (1871), and the first surgeon among the pioneer women physicians of America. Mary Putnam Jacobi (1842-1906), who was the first American woman to graduate in medicine at Paris, in the same year that Susan Dimock received her diploma in Switzerland, thus described her fellow-exile: "She was as fresh and girlish as if such qualities had never been pronounced incompatible with medical attainments. She had, indeed, a certain flower-like beauty, a peculiar softness and elegance of appearance and manner. I have wondered whether she did not resemble Angelica Kauffmann." Upon re-

turning to her native land, Susan Dimock returned to the New England Hospital as resident physician.

A NURSING PROCLAMATION. An annual report (1871-72) of the New England Hospital for Women and Children for the first time sounds a clear and confident note in nursing:

In order more fully to carry out our purpose of fitting women thoroughly for the profession of nursing, we have made the following arrangements: Young women of suitable acquirements and character will be admitted to the hospital as school nurses for one year. This year will be divided into four periods: three months will be given respectively to the practical study of nursing in the medical, surgical, and maternity wards, and night nursing. Here the pupil will aid the head nurse in all the care and work of the ward under the direction of the attending and resident physicians and medical students. In order to enable women entirely dependent upon their work for support to obtain a thorough training, the nurses will be paid for their work from one to four dollars per week after the first fortnight, according to the actual value of their services to the hospital. Certificates will be given to such nurses as have satisfactorily passed a year in practical training in the hospital.

This unequivocal statement was possible because behind it stood Susan Dimock.

FOUNDATION OF THE NURSING SCHOOL. For fifteen years, ever since her connection with the New York Infirmary (1857), Zakrzewska had been planning a training school for nurses, and had given brief instruction in nursing, both in the New York Infirmary and in the New England Hospital. One cannot, however, play with a school of nursing, and the few applicants insisted that tuition of four months was sufficient. It was not until the New England Hospital moved into an ampler building, in the Boston suburb of Roxbury, that it found space to establish its school for nurses, and also found the person to take charge of it. Zakrzewska was an expert midwife from her Prussian days, and her courses to nurses were mainly in the care of obstetrical cases. It was Susan Dimock who organized the New England Hospital for the definite training of women in general nursing (Sept. 1, 1872). Doctor Zakrzewska was the sponsor of New England's first training school for nurses; Doctor Dimock was its founder and first director. It was an honor for each of these remarkable women to be associated with the other.



THE PROBLEM OF PRIORITY. In the absence of minimum requirements for a school of nursing, and even of an official or accepted definition of what constitutes a school of nursing, it is inevitable that there should be various contenders for the title of "first training school for nurses in America." The talks, few of which have been preserved, centering around the lying-in chamber, which the surgeon Valentine Seaman instituted (1798) to the nurse attendants of the New York Hospital, are the reason for the statement on the wall of the hospital that here he organized the first regular training school for nurses, from which other schools originated. The Nurse Society of Philadelphia, whose guiding spirit was the Quaker physician Joseph Warrington, taught pupil nurses by lectures and showed them how to apply bandages, their practical work, however, being mainly in obstetrics; the seventieth annual of the Nurse Society of Philadelphia claimed priority for its school ("In active operation since 1828: the first school in America established to train women as nurses"). The Woman's Medical College of Pennsylvania (1850) founded the Woman's Hospital of Philadelphia (1861), which founded the Nurse Training School of the Woman's Hospital (1863), which regarded itself as the first chartered school for nurses in the United States, though it took six years before it was able to organize a curriculum of six months (1869).

As the nursing school of the New England Hospital was the first with a curriculum of one year, organized to give training in all branches of nursing, with hospital service in medicine, surgery, and obstetrics, supplemented with a course of lectures, it is frequently called "the first training school for nurses in America." Zakrzewska gave the opening lecture on the status and manners of nurses in families; the twins, Emily and Augusta Pope, gave four lectures on physiology; Lucy Sewall gave one lecture on food for the sick; Susan Dimock gave two lectures on surgical nursing; Helen Morton gave two lectures on childbed nursing; Emma Call gave one lecture on the use of disinfectants in the prevention of contagion; and Zakrzewska closed the didactic sessions with a lecture on general nursing. This was a total of twelve lectures for the entire course, not one by a nurse, but all by medical women. Nurses of today, confronted with hundreds of lectures in biological and physical science, and in social science, before they even reach medical

science and nursing and the allied arts, may ask: Was that a nursing school? It was, if we remember the date.

It cannot be stated dogmatically which school should be considered the first, for each was a step ahead of its predecessor, but there is a more important aspect to the subject. Much has been written, and certainly with justification, of the opposition of the medical profession to the introduction of trained nursing, and later to the state registration of trained nurses: to sweeten any lingering bitterness, let it then be recalled that all the five nursing schools for which the claim of "first" is made, were founded by medical men and the pioneer medical women of America. We see in summary: the shadowy schools evoked at the New York Hospital (1798) by Valentine Seaman; at the Nurse Society of Philadelphia (1828) by Joseph Warrington; at the New York Infirmary (1857) by Elizabeth Blackwell, Emily Blackwell, and Marie Elisabeth Zakrzewska; and the more substantial ones established at the Woman's Hospital of Philadelphia (1863) by Ann Preston and Emmeline Horton Cleveland; and at the New England Hospital (1872) by Marie Elisabeth Zakrzewska and Susan Dimock.

THE FIRST GRADUATE. On the day that the New England Hospital opened its nursing school, Linda Richards (1841-1930) was the first to enroll her name in the first class; one year later, when she received her diploma (Sept. 1, 1873), she carried with it the title of "America's first trained nurse." Miss Richards knew Doctor Zakrzewska only as one of the visiting staff who occasionally invited her to the office for special instruction and advice, but she knew Doctor Dimock as the one from whom she took her daily orders, though the pupil was six years older than the teacher. It was said of Susan Dimock, "She ruled the hospital like a little Napoleon," and long afterward Linda Richards remembered her "wonderful administrative ability, in addition to her unusual gifts as a physician."

THE SCHOOL ON DIMOCK STREET. Susan Dimock was on board the *Schiller*, when it was shipwrecked off the English coast. At the age of twenty-eight, the sea took the life of Mary Putnam Jacobi's "lovely and brilliant girl," whose passing she particularly deplored because it de-



prived the women physicians of America of their first surgeon. Mary Putnam Jacobi wrote in the professional press (*Medical Record*):

Both the surgical talents and surgical training of Dr. Dimock are certainly at the present date (1875), exceptional among women. It is on this account that our loss is irreparable, for at this moment there seems to be no one to take her place. Many battles have been lost from such a cause. But although ours be ultimately won, we would not, if we could, grieve less loyally for this girl, so brilliant and so gentle, so single of purpose and so wide of aim, whose life has been thus ruthlessly uprooted and thrown upon the waves at the very moment it touched upon fruition.

In the death of Susan Dimock, trained nursing in America, in its gestation period, likewise lost an irreplaceable figure. Her work went on. The school she founded now stands on Dimock Street, and in the intervening years many patients have rested in the hospital's free bed endowed in her memory.

### FIRST NIGHTINGALE SCHOOL IN AMERICA

IN MISS SCHUYLER'S PARLOR. Louisa Lee Schuyler (1837-1926), a direct descendant of Philip Schuyler and of Alexander Hamilton, did not lack the intrepidity of the Revolutionary general or the financial acumen of the first secretary of the Treasury. During the Civil War, Miss Schuyler, a moving spirit in the Woman's Central Association of Relief at New York, "received and disbursed in supplies and money, several millions of dollars in value." After the war, she founded the State Charities Aid Association, and was always assembling groups of women, and holding meetings for the public welfare. At a later date, it was she who succeeded in transferring all insane inmates from county poor-houses to state hospitals, thus supplementing the work of Dorothea Lynde Dix; and it was she who initiated the National Society for the Prevention of Blindness. When Miss Schuyler issued a call to the women who had worked with her during the war, the group gathered around their leader. On a wintry day (Jan. 26, 1872), several ladies were sitting in Miss Schuyler's parlor, when Mrs. William Henry Osborn entered the room, bringing and introducing her friend, Mrs. Joseph Hobson.

MRS. HOBSON IS HERE. Miss Schuyler smiled in satisfaction, for the success of the meeting was now assured. Mrs. Osborn (Virginia Reed

Sturges) was the wife of the railroad president, and Mrs. Hobson (Elizabeth Christophers Kimball) was the wife of the international merchant. Like Miss Schuyler, these two women belonged to the aristocracy of America, and their families by blood and marriage were connected with an amazing number of the makers of the history of the nation. After the introductions were over, Miss Schuyler pushed a pencil and paper toward Mrs. Hobson, and instructed her to take the minutes, as she was the secretary of the meeting. Mrs. Hobson protested, because, as she said, "I had never attended a meeting of any kind in my life."

Miss Schuyler was a woman of action, and before that meeting ended, a committee was named to report on the condition of Bellevue Hospital. Then a subcommittee to visit the surgical wards for women was formed, and Mrs. Hobson was appointed chairman. Parliamentary procedure, under the practiced hand of Miss Schuyler, moved rapidly and efficiently. The motion was put, seconded, and carried, while Mrs. Hobson was still protesting. Mrs. Hobson was dismayed, and with adequate reason. Mrs. Hobson did not exaggerate when she wrote, "I have never to this day understood why I was named chairman of that committee, for a woman more absolutely ignorant of the subject could not have been found on Manhattan Island. I had never been in a hospital." Mrs. Hobson had passed her fortieth birthday when this new experience loomed before her. It should not be inferred from Mrs. Hobson's innocence of meetings and hospitals that she had been a stay-at-home, for just the contrary was the case.

In her teens she had gone around the world, which was an unusual experience for a girl in those days; she was still in her teens when she married, and her husband's business made her a confirmed globe-trotter. She lived so long in South America that not only did she speak Spanish like a native, but her friends noticed she spoke English with a Spanish accent. On one of her visits home, she gesticulated so freely in the Spanish fashion, that although she was a married lady, her father threatened to tie her hands. She delighted to ride by moonlight over the vast estates of her friends in Peru. She could not count the number of naval officers with whom she danced the time away on the smooth decks of their ships-of-war. At carnival in Lima, she stood for hours at her balcony, concealed behind a lattice and convulsed with laughter



as she drenched with pails of water everyone who passed beneath her window. Wherever she went, a corps of disciplined servants was at her disposal. Fun-loving and popular, charming and rich, life was a gay party to the happy Mrs. Hobson.

LOOKING AT BELLEVUE. The wards of Bellevue Hospital in those days did not remind Mrs. Hobson of her superb home in Lima, built around two courts, seventy-five feet in width, two hundred feet deep, with lofty ceilings of carved cedar. Nor were the smells of the hospital reminiscent of the Spanish gardens whose fragrance she had inhaled for years. Mrs. Hobson's initiation into the hospital world was abrupt and drastic: on her first visit she was overwhelmed by nausea, and to save herself from fainting she left the loathsome building. But Mrs. Hobson was chairman of the visiting committee: she would not fail her new friend Louisa Lee Schuyler, nor impede the work of the State Charities Aid Association. The next day, Mrs. Hobson returned to Bellevue, and did what Miss Schuyler had told her to do: she looked around.

She was utterly perplexed, and instead of looking at the patients she found herself looking at a tall young interne who was looking at her. She went up to him and explained that she had to write a report, and, in her naive way, asked him what she should look for. The interne spoke out of the side of his mouth in a Southern accent, for though he had graduated from Bellevue Hospital Medical College (1871), his home town was Chester, South Carolina, and his name was Walker Gill Wylie (1848-1923). This good-looking youth warned her that if they were seen together, he would lose his position of house surgeon, but he promised he would meet her in secret and give her an education. Before going away, he whispered in her ear the first rule of hospital administration: "Go into the bathroom."

BELLEVUE BATHROOM. Mrs. Hobson marched into the bathroom, and learned that a nurse slept there: not in the bathtub, however, for that was filled with the filthiest rubbish that Mrs. Hobson ever saw. In that bathroom, Mrs. Hobson began her acquaintance with the ten-day women of Bellevue: women who had been arrested for drunkenness or disorderly conduct, and given ten days in jail, a sentence which they were permitted to serve, after being temporarily sobered up, as nurses

in the wards. Their assistants were convalescing paupers. When Mrs. Hobson got out of the bathroom, she saw a bag of salt fish dumped on the table, for it was Friday; the ambulatory paupers helped themselves, and carried portions on a tin plate with a spoon to their bed-ridden fellows. While Mrs. Hobson was watching, the young doctor mysteriously appeared, and without seeming to know him, she followed him out of the ward.

LAUNDRY WITHOUT LAUNDRESS. In the hospital laundry, suffocating steam was rising from immense caldrons filled with foul clothing. A solitary pauper was indifferently stirring the hideous masses with a stick. "Where are the laundresses?" asked Mrs. Hobson. "No laundress," said the old man. "Where is the soap?" asked Mrs. Hobson. "No soap," said the old man. Bellevue Hospital, with its large population of patients, had not received a single cake of soap for six weeks. In the kitchen, a tremendous colored cook was ladling out greasy soup from the same caldrons which were used in the morning for tea and coffee; pauper women, huddled together in the corner, were peeling potatoes. Well, Mrs. Hobson was obtaining material for her report, but again the smells conquered, and she fled. She had to breathe the outside air.

WALKER GILL WYLIE. On the morrow, she was again at Bellevue. The house surgeon had said in his cryptic manner, "It will take weeks for you to learn all the horrors of this place, but don't be discouraged." A really satirical interne was Walker Gill Wylie. Mrs. Hobson learned that sponges for washing wounds were used on one patient after another without any disinfection. She learned that stalwart young men, coming to Bellevue for a minor operation, would die of pyemia—a new word in her vocabulary, but it grew sadly familiar. She learned there were no night nurses in the wards, only a passing night-watchman making his rounds. She learned that patients were found dead in the morning, having died unattended except by the scampering rats. One day, on her way home, she stopped at a bookseller's, and ordered all the works of Miss Nightingale. It dawned upon Mrs. Hobson that what Bellevue Hospital needed was a training school for nurses on the Nightingale system. She then found that Miss Schuyler had been at Bellevue before her, and that was her idea from the beginning.



The State Charities Aid Association appointed Mrs. Hobson chairman of the hospital committee, whose duty was to organize a training school on the model of the Florence Nightingale school at St. Thomas's Hospital in London. Walker Gill Wylie, Mrs. Hobson's first friend at Bellevue and faithful to the end, offered to go to England at his own expense and consult Miss Nightingale herself. Wylie spent three weeks in St. Thomas's Hospital, acquiring invaluable information for himself and for the ladies in New York. He had miscalculated when he said he was going to see Miss Nightingale, for it was easier to see Queen Victoria. But Wylie did not return emptyhanded: Miss Nightingale wrote him a letter. "This letter," said Mrs. Hobson, "we have always regarded as the Constitution of our School." It is not surprising that so dauntless a youth, while still in his twenties, wrote the Boylston prize essay of Harvard University for 1876, *Hospitals: Their History, Organization, and Construction* (New York, 1877), which differs from most prize essays by being a work of permanent importance. In after life, when Wylie had become an eminent gynecologist, he had the detestable habit of swearing at his assistants during a difficult operation, but he ranks with Gross and Stephen Smith as one of the medical builders of trained nursing in America.

ABBY HOWLAND WOOLSEY. With Miss Nightingale's letter as a charter, the Bellevue ladies worked for their goal. Their purpose, as Louise Darche pointed out, was neither to reform nursing nor to create a new profession for women, but to provide better nursing for the great charity hospital of New York. Abby Howland Woolsey, who had served in hospitals during the Civil War, and with her sister Jane waged a private war in the Presbyterian Hospital, drafted the plan for the training school; in our centennial year there appeared the significant volume, *A Century of Nursing*, which was issued anonymously, but its author was Abby Howland Woolsey. The women who labored for the training school were representative of the feminine culture of New York, and though they were not entitled to vote, their social position gave them considerable influence. There were mountains of prejudice to be overcome, not only on the part of the commissioners of Public Charities and Correction, but from the Medical board which asserted that the male patients of Bellevue—a sociological observation preserved by

Stephen Smith—were “nòthing but a raft of bums from Five Points and the Bowery, and to send women nurses among them would be an outrage.”

The ladies of the hospital committee made progress, despite all obstacles. They were aided by the medical profession, thirty-four of the leading physicians in the city signing a printed statement that they hailed with pleasure the project of a training school for nurses in this country. Against them were arrayed the conservative members who argued that the old nurses were good enough, and that these new nurses would be overtaught, and, in the disguise of nurses' caps would actually be students of medicine. This was the prevailing opinion, and most of the politicians were immovable. Frankly, it was not the justice of the cause which finally won, but the social position of the crusaders: they belonged to the dominant religion, their ancestry grew more glamorous with the generations, and their husbands were wealthy and influential. In time, all was ready at 314 East Twenty-sixth Street, except that the matron was missing.

**THE SUPERINTENDENT'S BED.** This meant that the one indispensable figure was lacking, for according to the Nightingale plan the lady superintendent or matron was the pivot around which revolved the entire school. Among the members of the hospital committee were women of wit and ability, but not one was qualified to act as the Bellevue matron, and none of them knew where a suitable matron could be obtained. As the time for opening the school approached, Mrs. Hobson expressed her anxiety to Mrs. Osborn, who calmed her fears with the reply: “I shall make that superintendent's bed, confident that she will come to occupy it.” A few days later, when Mrs. Hobson was at breakfast, her maid announced a visitor who looked like a Sister of Charity. Sister Helen filled the room, and Mrs. Hobson was repelled, for she found her exceedingly unprepossessing: Sister Helen spoke, and Mrs. Hobson succumbed to the magic of her English voice. For three years, Sister Helen slept in the bed that Mrs. Osborn had prepared for her.

**SISTER HELEN.** The Bellevue School of Nursing, the first training school in this country founded on the Nightingale plan (May 1, 1873), has since been known as the Mother of American Schools of Nursing. Helen



Bowden, English born and bred, was a woman of mystery: no one asked her age or lineage, or ventured to inquire into her personal history. As Sister Helen, she was a member of All Saints Sisterhood, the Protestant organization in charge of the nursing in University College Hospital of London. She herself had had charge of a pauper hospital in northern England, where she had become familiar with work-house authorities. She had been sent to Baltimore to establish a branch of All Saints Sisterhood, and, during her leave of absence, she stepped into the Bellevue school. With the coming of Sister Helen, the ladies of the hospital committee receded into the Bellevue background.

Sister Helen had a temper. Mrs. Hobson heard about this temper from Baltimore, where she had telegraphed for corroboration of Sister Helen's qualifications, but she decided that a temper for Bellevue was an additional endowment which Sister Helen had modestly failed to mention. Sister Helen's bulky form was accentuated by her long, loose robe of black serge, from whose side hung a crucifix; inscrutable eyes peered from a waxlike face, encased in a large, closely fitting coif of snowy whiteness, which hid her hair and covered her neck. No one ever saw her otherwise than in her undeviating, conventual garb. The majority of the patients, who were Irish Catholics, were awed by her commanding manner and the swaying crucifix, and assumed she was of their faith. She was so adept at hospital politics that the commissioners learned to keep out of her way. While sitting in her upholstered chair, with its carved arms and tassels, she could have dictated a book on nursing ethics without consulting a single reference. The rules of discipline, the problems of seniority, were at her fingertips. Mrs. Hobson said that Sister Helen always reminded her of a Lady-Abbess controlling her novices.

STEPHEN SMITH. Sister Helen as administrator was unrivaled, and her reign was unquestioned. Stephen Smith (1823-1922), so frequently a pioneer in public health, was the first to ask for the new nurses. After the trained nurses had been in charge of a few wards in the hospital, the authorities, who had opposed the innovation, turned around and requested these nurses to take over all the wards, which caused the eyes of certain ladies to twinkle. The very doctors who had denounced the newfangledness, became indignant if the new nurses were removed

from their service. The coexistence of the old nurses and the new was an impossible anomaly, and thus the ten-day women were dismissed. Their manner of going was described by Stephen Smith:

The school soon proved so efficient that it was not long before the old nurses were entirely supplanted. They went with very bad grace, however. They commented on the situation rather volubly with their tongues, and punctuated and emphasized what they had to say by throwing stones at their successors in the Bellevue Hospital grounds, as also through the windows of the nurses' building.

Considering the change that had taken place, a little blasphemy, with a few broken windows, was not too heavy a price to pay.

EUPHEMIA VAN RENSSELAER. No nurse in America had ever worn a uniform, and the first suggestion of a uniform evoked an outcry against livery. Among those in Sister Helen's first class was Euphemia Van Rensselaer; to the distinction of her family name, she added personal beauty. She was absent from Bellevue for two days, and when she reappeared she had on a blue and white seersucker dress, with white apron, collar, and cuffs, and on her head was a white cap. One glance at that charming figure, which cast into the shade the drab house dresses of the others and made them look like domestics, was enough: within a week every nurse was wearing the uniform which became the mark of a Bellevue nurse.

Miss Van Rensselaer rendered another service to nursing and to humanity: female patients were brought into the amphitheater and discussed and percussed in the presence of the medical students, or injected, or operated upon in their midst, without the protection of a female nurse. Medical students (in those days) were masters of catcalls, horse-laughs, falsetto wails and Indian war whoops, and no nurse possessed the self-assurance to brave them when they were assembled en masse, eager for mischief. Miss Van Rensselaer said, "I am not afraid," and taking another nurse with her, entered the crowded operating room. The first murmur of surprise was succeeded by unbroken silence. The surgeon, Alpheus Benning Crosby (1832-77), who had operated in the clinics of Dartmouth Medical School, University of Vermont, University of Michigan, and Long Island College Hospital, before coming to Bellevue, had never worked in such cathedral-like stillness. An hour later,



when the students stampeded down the stairs, they had witnessed not only a surgical operation, but a hospital revolution.

FAREWELL OF SISTER HELEN. Suddenly, Sister Helen was unmasked. She said she was sick, and was obliged to return to England. She had expected to bid the members of the training school farewell in person, but found she could not. Therefore she wrote a letter (May 1, 1876) beginning: "Dear Friends and Fellow-Workers: I had quite intended to have a little talk with you this evening and wish you all good-bye, but I am stupidly weak and may not be able to bear it. So I will write you a loving farewell instead." Then she blessed all who had worked for the welfare of the school, and pointed out that their labor would have been of no avail except for the earnestness and self-sacrifice of the nurses. She thanked those most who had been with the school the longest. Once more she bade them an affectionate good-by and blessed them. She concluded with the hope that when they read her letter they would not say, "Sister speaks as if we were never to see her again," but admonished them, "Only remember parting is certain, meeting always doubtful." Then she signed her name.

So this was the iron woman who had pitted her strength against intrenched corruption, sweeping it away by her presence. This was the implacable Superintendent, jealous, exacting, domineering, and despotic, at whose glance trembled the pauper, the probationer, and the politician. Why, she was a big cry-baby, afraid to meet her nurses to say good-by, for fear she would break down and weep. Sister Helen spent herself in those three years for Bellevue. If America's first school on the Nightingale plan had failed, trained nursing in this country would have received a fatal blow. Sister Helen built the Bellevue school on enduring foundations, and, from its early years, an extraordinary number of the leading nurses of America have been Bellevue graduates. The impress of her personality remained long after she had left these shores, never to return, and no one familiar with the chronicle of nursing could enter the old gateway of Bellevue without making obeisance to the noble ghost of Sister Helen of All Saints Sisterhood.

## EARLY TRAINING SCHOOLS IN AMERICA

In the decade (1873-83) after the establishment of the school in Bellevue Hospital, the following schools (with their date of organization) trained the nurses of America: Nurse Training School of the Woman's Hospital, Philadelphia (1863); Training School for Nurses of the New England Hospital for Women and Children, Boston (1872); Bellevue Hospital Training School, New York (1873); Connecticut Training School for Nurses, New Haven (1873); Boston Training School for Nurses at the Massachusetts General Hospital (1873); Training School for Nurses at the Charity Hospital, New York (1875); New York Hospital Training School for Nurses (1877); Hartford Hospital Training School for Nurses, Connecticut (1877); City Hospital Training School for Nurses, Boston (1877); Washington Training School for Nurses (1877); Buffalo General Hospital Training School for Nurses (1877); Training School for Nurses at the Brooklyn Homeopathic Hospital (1878); Training School for Nurses of the Rochester City Hospital (1880); Brooklyn Training School for Nurses (1880); Illinois Training School for Nurses, Chicago (1881); Mount Sinai Training School for Nurses, New York (1881); Training School for Nurses of the Long Island College Hospital, Brooklyn (1882); Mary Fletcher Hospital Training School for Nurses, Burlington, Vermont (1882); Training School for Nurses of the Orange Memorial Hospital, New Jersey (1882); Training School for Nurses of the Northwestern Hospital for Women and Children, Minneapolis (1882); Rhode Island Hospital Training School for Nurses, Providence (1882); Cincinnati Training School for Nurses (1883); Farrand Training School for Nurses of Harper Hospital, Detroit (1883); Charleston Training School for Nurses, South Carolina (1883); Training School for Nurses at the General Hospital of Paterson, New Jersey (1883); Training School for Nurses of the City Hospital, Indianapolis (1883); Cleveland Training School for Nurses, Ohio (1883). There were rumors that the Johns Hopkins Hospital, which had not yet opened, was preparing a school which would make Baltimore a leading center of nursing education.



## NEW NURSES IN OLD BLOCKLEY

PHILADELPHIA ALMSHOUSE. Colonial America erected the Philadelphia Almshouse (1732), which developed into the Philadelphia General Hospital, often spoken of as "America's oldest hospital," and affectionately referred to as "Old Blockley," after some of its buildings among the farmlands in Blockley Township. The institution was a combination of almshouse for paupers, workhouse for vagrants, jail for criminals, asylum for the insane, and hospital for the sick. Why did writers who described this institution in the following century employ the overworked simile of Dante's *Inferno*? Why was the Board of Guardians popularly known as the "Board of Buzzards"? Why should a hospital, conceived in human sympathy and born of Quaker benevolence, become a gold mine for corrupt politicians? Old Blockley, designed as a laurel leaf for the proud brow of Philadelphia, was a stinkweed in its nostrils.

BLOCKLEY DAYS. An obscure Philadelphia physician who ventured into his storeroom to look for something, walked into posterity. Poking around dust-covered, discarded articles, he forgot the object of his search when in an old packing-box he found a notebook he had written thirty years before. It was *Blockley Days* (1883-84), and this diary of his internship gave Arthur Ames Bliss (1859-1913) his column in dictionaries of American medical biography. The diarist's unforgettable pictures of the politicians, patients, and untrained nurses, the sordidness of the personnel, the unsanitary surroundings, and the enveloping gloom of the whole place, exposed the Blockley of his time as a place of horror (Dante's *Inferno*). The diarist's fellow-graduate, Barton Cooke Hirst (1861-1935), destined to become one of the master obstetricians of America, escaped Blockley because of his sensitive nose:

After graduation (1883) I received an appointment as interne both in the Philadelphia and the University Hospital. Before making a choice I was taken through the former by an interne. The first thing encountered by a visitor to Blockley in those days was its famous smell, compounded of dirty patients, dirtier nurses, usually drunk, recruited from the paupers, badly cooked food, neglected garbage, and ancient, unhygienic, ill-ventilated wards. Passing the foot of a bed occupied by a desperately ill woman and asking what ailed her, the interne, with a shrug of his shoulders, said she was too dirty to examine. Evidently this was no place for me, with a better internship in prospect.

In his commentary on *Blockley Days*, Howard Atwood Kelly (1858-1943), the eminent Bible-class teacher and gynecologist, recalled a humbler Kelly who left his mark on the hospital:

We have here the Blockley Almshouse filled to repletion with its dregs of humanity, and scandalously managed by the Board of Buzzards, within the memory of many of us yet living, run by a thieving superintendent who filled houses from roof to cellar with food and goods stolen from the poor, the natural outcome of Philadelphia's evil political system, which still rules the city. . . . It was here, I think a little later, that the artistic Kelly the Bum tattooed some sixteen men and infected as many with syphilis.

BOARD OF BUZZARDS. The hospital situation became so notorious that Philadelphia no longer made an effort to hide it, but cried its shame aloud to the world. The press of the city demanded that the Board of Guardians of the Poor, institute reform, beginning with itself. It became obvious that the political-appointed pauper nurses, male and female, hard faced and deformed, illiterate and belligerent, looking like members of a pirate crew which had fallen on hard times, must be replaced by trained nurses. What the hospital needed was a school of nursing, and since hospitals all over the country had schools of nursing, there was every reason why the premier hospital of America should have a school of nursing. When agreement on this point was unanimous, it became necessary to find a woman capable of heading a school of nursing. As far as anyone knew, no such woman existed in Philadelphia or its suburbs.

IN THE CRADLE OF AMERICAN MEDICINE. Philadelphia is the Salerno, the Civitas Hippocratica of America. Philadelphia was the cradle of American medicine, for medical students in America first went to school in Philadelphia. Before the Declaration of Independence was signed in that city, and before Betsy Ross of Arch Street made the first flag of the new nation, Colonial America established its first medical college as the College of Philadelphia Department of Medicine (1765), which evolved into the University of Pennsylvania Department of Medicine. The founder of the Pennsylvania Hospital, Thomas Bond, instituted the first course of clinical instruction (1766) for the first medical students of America. Yet in the latter years of the nineteenth century, Old



Blockley could not call on any of Philadelphia's daughters to organize a school of nursing.

Discussion began, and, in time, it was realized that only God knew when it would end. At last Edward Hoffman, the new president of the board, complained:

People have been dying here because they have not had the trained nurses which we hope this school will give them, and I think it is a shame that there should be such a petty spirit of opposition shown by a few members of this Board. I may as well say to you that I have been told that the opposition is kept up just for the fun of the thing. I can't quite see, for myself, where the fun comes in when people are losing their lives by such action.

At these words, John W. Durham, jumping to his feet, shouted: "If you mean me, I'm not fun. I want a Philadelphia woman for the position." Local pride was outvoted, and Philadelphia appealed to New York.

GEORGE WILLIAM CHILDS. The special committee of the Board of Guardians honored Harriet Clute by inviting her to take charge of the projected Blockley school. For the eight years previous, Mrs. Clute had been in charge of the training school for nurses at Blackwell's Island, the narrow land in the East River where New York dumped its derelicts, its incurables and incorrigibles, and where politicians held high carnival. Mrs. Clute was not afraid of anything, but when she heard of the Board of Guardians she declined the honor. The board then turned to Mt. Sinai Hospital of New York, where Phoebe Washburne was chief nurse, and requested her to become chief nurse at the Blockley Hospital. Miss Washburne likewise declined. By this time the tired board was discouraged and ready to drop the whole matter, but the proprietor of the *Public Ledger*, George William Childs (1829-94), with characteristic competence, asked a London correspondent to consult headquarters. Florence Nightingale suggested Alice Fisher.

ALICE FISHER. It may be claimed for Alice Fisher (1839-88) that she was well born, since she was born in the apartment formerly occupied by Henrietta Maria, the scheming queen-consort of Charles I, in the Queen's House at Greenwich, England. Several years before her birth, her father George Fisher, navy chaplain and astronomer, in which

double capacity he liked to serve on polar expeditions, had been appointed headmaster of Greenwich Hospital School. This was carrying on a family tradition, for the Fishers were noted as educators, and Miss Fisher's grandfather had been headmaster of the largest of the old public schools of England, the "King's College of Our Lady of Eton beside Windsor" (Eton College, 1440). Miss Fisher grew up in a cultured household, and after her father's death she found herself, a mature and educated woman, without an occupation. This had been the common fate of English ladies, but their liberator had appeared and was now living among them. At St. Thomas's Hospital, Florence Nightingale had opened a door for the Alice Fishers of her generation and of the generations to come.

INCLUDING MISS HORNER. Alice Fisher entered the Florence Nightingale School at St. Thomas's Hospital (Jan. 1875) as a lady-probationer, her maid Emma enrolling at the same time as nurse-probationer. Alice Fisher shone like a star in the training school, and a year later she was assistant superintendent of the Edinburgh Royal Infirmary, becoming in turn superintendent of the Fever Hospital at Newcastle, and of Addenbroke's Hospital at Cambridge, and after serving in the Radcliffe Infirmary at Oxford, she made a record as lady-matron of the General Hospital of Birmingham. Miss Fisher's appearance was striking and her personality magnetic: a long nose protruded from a face that was both eager and ascetic; she had the golden hair of the Saxon, and the low and musical voice of the gentlewoman of all nations; almost six feet tall, she seemed even taller because of her gauntness. Her character and ability made her one of the most important disciples of Florence Nightingale, and when the mother of nurses selected her to recast and reconstruct Old Blockley, it was a royal command. Alice Fisher not only agreed to go, but offered to bring with her Edith Anne Horner as assistant. Miss Horner was no novice; for her efficiency as a nurse in the Zulu War (1879), she had been decorated by Queen Victoria.

THE SALARY SCANDAL. In a long, disgraceful history, there now occurred the most disgusting episode of all. Miss Fisher asked \$1,000 a year for her services, while the board offered only \$800. When a motion was made to place Miss Horner on the payroll of the hospital at \$25 a



month, it was argued that the amount was excessive. The Philadelphia press reported:

Scarcely had the resolution been read when Dr. Ziegler was on his feet and entered a vigorous protest, based upon the ground that, there being no vacancies in the department, the resolution to appoint could not prevail. . . . At a later meeting Dr. Daly moved to amend by substituting for \$25, to be paid to Miss Horner, \$20 a month, the amount paid to other nurses. Dr. Biddle said that, in view of the great ability of Miss Horner, it was a little narrow-minded to refuse her \$5 more than what is paid to ordinary nurses.

The City Council was ready to sacrifice the reform of the hospital on the question of appropriation: millions for politicians, but not an extra dollar for nurses. What finally happened was that Childs again came to the rescue, and with his partner, Anthony Joseph Drexel, paid the necessary traveling expenses and made up the deficit in salary. Late in the season of 1884, when the *British Crown* sailed for America, among the passengers were Miss Fisher and Miss Horner.

REVOLUTION IN OLD BLOCKLEY. With the formal opening of the nursing school (Jan. 1, 1885), the modern era began for Blockley. It was not perceived at once, for the old smells and the old rubbish and some of the old nurses had to be removed. Male attendants had charge of females who were mentally ill, for this department was not yet under Miss Fisher's authority. When a fire occurred which burned many of the insane inmates to death in their locked cells, Isabella McIntyre was asked to help with the rescue work. Miss McIntyre stood in front of Miss Fisher and snarled her defiance: "I won't do it. I am tired of receiving orders from you. I will do just what I wish to do and no more. I have been gadding about all over the place, and I am tired of it." Other nurses, when requested to change their tactics or leave the institution, treated Miss Fisher to a shower of rotten eggs on their way out. Alice Fisher had a lady's control of her temper, and within six months she was in full control of the hospital. At the end of one year, fifteen women whom she had trained were graduated as the first class of Blockley nurses (1886). The revolution in Old Blockley was now in full swing.

THE PASSING OF THE FOUNDER. Joseph Roswell Hawley, a major general in the Civil War, governor of Connecticut, and United States senator

from Connecticut, was a widower in his sixties when he upset the new regime in the Philadelphia Hospital by making the charming Miss Horner the second Mrs. Hawley (1887). Miss Fisher never left the hospital. All that she had, she placed on the altar of Blockley. In her fourth and final year, she knew she would not be well again, but continued to direct the hospital from a wheel chair pushed around by able-bodied, chronic patients. As the end approached, she indicated her desire to rest on the slope of Woodlands Cemetery, within sight of the beloved hospital whose nursing she had regenerated. Her years at Blockley were brief, but the impression she made was permanent. Members of the hospital staff like Barton Cooke Hirst, who found that Blockley had been cleansed since the days he had refused to interne there, and medical students like Joseph McFarland, who attended Blockley clinics in her time, never forgot Alice Fisher.

OSLER'S TRIBUTE. Osler wrote in his notebook: "June 3, 12:15 A.M. 1888. I have just left the death-bed of Miss Fisher—a sweet blessed character whose influence upon me and upon others has been great in . . ." There is no ending, for grief prevented William Osler from finishing the sentence. A few days later, it was his duty to write a brief editorial, unsigned, for the *Medical News* (Philadelphia, 1888; Vol. LII, p. 642):

The public of Philadelphia has sustained a severe loss in the death of Miss Alice Fisher, who nearly four years ago was appointed by the Board of Guardians to take charge of the Training School for Nurses at the Philadelphia Hospital. Only those familiar with the inner history of that institution can appreciate the changes which have been effected under her judicious direction. The good work which she has accomplished has stimulated other hospitals of the city, and training-schools have been established at the Pennsylvania, Episcopal, and University Hospitals. By no means the least important lesson of Miss Fisher's too brief life in this community has been the demonstration of the fact that the profession of nursing affords an ample as well as a most suitable field for women of the highest culture and intelligence.

THE WHITE FLOWER. So the founder of this school passed on, but her work went forward. In the years that followed, nearly all the successors of Alice Fisher as head of the Philadelphia General Hospital have been graduates of hospitals in Philadelphia, and thus in a sense have been her pupils: Marion E. Smith (Blockley, 1886), Margaret Frances Donahoe (Mass. General Hospital, 1902), Nellie May Rennyson (Episcopal



Hospital, 1897), S. Lillian Clayton (Blockley, 1896), and Loretta M. Johnston (Blockley, 1922). Miss Clayton (1874-1930) became a national figure in nursing, and when the journey suddenly ended, she was buried by the side of Miss Fisher.

The Blockley nurses established a beautiful custom: every year they form in line and visit Alice Fisher; every nurse stoops and drops a white flower on her grave. Now there are also flowers for Lillian Clayton. The new nurses of Old Blockley, marching in the van of progress, have gone around the world.

### FIRST TRAINING SCHOOL IN MARYLAND

BALTIMORE MERCHANT. Strangers who saw old Johns Hopkins (1795-1873) without an overcoat in winter hurrying through the streets of Baltimore, did not realize that he was one of the richest men in the city. Johns Hopkins spent little on himself, for he was a lonely man: in his youth he loved his cousin Elizabeth, but marriage was forbidden because of their relationship, and both the cousins remained single. Johns Hopkins made his first fortune in whiskey. He had little learning, for he had been only twelve years of age when his Quaker parents liberated their slaves on principle, and the boy was taken from school to work on his father's plantation. Johns Hopkins, who had no education himself, had a vision of an educator's paradise: a university free from ecclesiastical control and legislative interference; a medical school, on a university basis, whose soul would be research; a hospital for the sick and suffering which would advance medical education; a school for female nurses whose training would benefit the whole community; and an asylum for colored orphans. Old Johns Hopkins created an epoch with his money, for no man ever did so much with seven million dollars.

SCHOOL OF NURSING. Johns Hopkins University opened in America's centennial year (1876). There may not appear to be an intimate connection between railroads and medical education, but because the Baltimore & Ohio Railroad suspended payment on its common stock, the opening of the hospital and training school (1889) was delayed for

thirteen years, while the inauguration of the medical school was deferred for seventeen years (1893). The Johns Hopkins Hospital School of Nursing was not an afterthought of the president or the trustees, but was part of the original plan of Johns Hopkins himself, who had written long ago (Mar. 10, 1873): "Gentlemen, I have given you thirteen acres of land upon which I desire you to erect a hospital. I desire you to establish in connection with the hospital a training school for female nurses. This school will secure the service of women competent to care for the sick in the hospital wards and will enable you to benefit the whole community by supplying it with a class of trained and experienced nurses." Despite the years of delay, the Johns Hopkins Hospital School of Nursing (May 1889) was the first in Maryland, preceding, by some months, the University Hospital School of Nursing (Dec. 1889).

FIRST PROBATIONERS. Those connected with the hospital in its early days became Wordsworthian: "Bliss was it in that dawn to be alive, but to be young was very heaven!" This feeling explains why Marion Turner, the first probationer, married Brockway, the first resident surgeon; Caroline Hampton, the head surgical nurse, married Halsted, the head of the surgical department; Mary Gross, a graduate of the first class of nurses, married Finney, of the surgical department; Evelyn Pope, also of the first class, married Lord, of the dermatology department; Susan Chisolm Read, likewise of the first class, married Thayer, professor of medicine. Not to be outdone by her pupils, Isabel Adams Hampton, the first superintendent of nurses, married Robb, the first resident gynecologist. The memories of old Baltimoreans could add other couples to this list. Evidently there was justification for Osler's complaint to President Gilman (March 6, 1890): "Miss Hampton has been most successful in getting probationers of a high class; but unfortunately she selects them altogether for their good looks and the House staff is by this time in a sad state." It is doubtful if Cupid ever shot so many arrows into so many medical and nursing bosoms in one hospital in so short a time.

HENRY MILLS HURD. The University was fortunate in its first president, Daniel Coit Gilman, apostle of academic freedom in America; and the



hospital was fortunate in its first superintendent, Henry Mills Hurd (1843-1927). A full report of the formal opening of the training school was published in the first issue of the *The Johns Hopkins Hospital Bulletin* (Dec. 1, 1889). In his address, "The Relation of the Training School for Nurses to The Johns Hopkins Hospital," Hurd said:

Lest there may be a misconception I ought to add that enthusiasm in work, devotion to duty, unresting fidelity to high ideals of efficiency, keen humanitarian impulses and love of scientific truth, cannot and must not be considered obligations peculiar to nurses. The trustees and officers of the hospital accept similar obligations for themselves, and expect equal enthusiasm and devotion from all connected with the hospital in any responsible capacity.

This was, indeed, a new thought in addresses to nurses. One of the perils of studying nursing in those days, was the moral sermonizing to which nurses were subjected by eminent representatives of theology, law, or medicine, who lectured the nurses as if they were morons, and, at the same time, exhorted them to exhibit the virtues of angels. Unless the minds of the nurses wandered while these moral maxims were poured over them, they certainly suffered. To cultured and sensitive nurses, the banter of Osler and the condescension of Weir Mitchell must have been an ordeal. Hurd's address was forthright and upright.

HOPKINS NURSE. With America's leading nurse as first superintendent of nurses, and with such subsequently famous graduates—to name only a score—as Sarah Addison, Bessie Baker, Helena Barnard, Grace Baxter, Alice Carr, Katherine DeLong, Alice Louise Florence Fitzgerald, Elizabeth Gordon Fox, Florence Hunt, Elsie Mildred Lawler, Ellen Newbold LaMotte, Georgia Marquis Nevins, Clara Dutton Noyes, Mary Adelaide Nutting, Lucile Petry, Elizabeth Smellie, Robina Stewart, Effie Jane Taylor, Rebecca Thelin, and Carolyn Conant Van Blarcom, the school of nursing of the Johns Hopkins Hospital became one of the foremost in the world. The "Hopkins nurse" keeps in touch with alma mater through The Johns Hopkins Nurses Alumnae Association (1892), and through the pages of her lively quarterly (first issue, Dec. 1901), *The Johns Hopkins Nurses Alumnae Magazine*.

## STATE REGISTRATION OF NURSES

WORLD'S COLUMBIAN EXPOSITION. The four hundredth anniversary of the discovery of America by a sailor from Genoa was commemorated in Chicago by the World's Columbian Exposition, which opened with the long shriek of Harriet Monroe's "Commemoration Ode" (Oct. 1892). "And, lo!"—to quote a favorite phrase of the poetess—despite that ghastly written-to-order ode the fair was a success, for it had many interesting features. The fair had momentous consequences for nursing, as it brought together for the first time (1893) Ethel Gordon Manson (Mrs. Bedford Fenwick), the leader of British nursing, and Isabel Adams Hampton (Mrs. Hunter Robb), the leader of American nursing. During the conferences of these two brilliant women, there were planted the seeds of an international organization of nurses, a national organization for the nurses of the United States and Canada, and the state registration of nurses. Both had the highest esteem for Florence Nightingale, to whom all such things were an abomination, and both realized that only by disregarding the venerable mother of their profession could there be further progress in nursing.

MISONEISM. Mary Putnam Jacobi, in commenting (1891) on the former antagonism of medical men to medical women, summed up the situation in a footnote: "Thus whatever is, invariably seeks to strangle in the birth that which is about to be!" No better example of misoneism, the hatred of anything new, can be found in the annals of human intolerance than the opposition to the state registration of graduate nurses. Looking backward, it is possible to understand the resistance to the training of nurses: some believed that young ladies should not be taught the mysteries of bodily functions; some believed they did not have the requisite physique because of the monthlies; some believed they could not comprehend a technical curriculum because women did not have scientific minds. But after this battle had been won, and the physician had found the trained nurse so indispensable that he was heard demanding, Where in hell is the nurse? whenever she was not at his elbow—it is incredible that when the movement began for the legal registration of graduate nurses, a movement which meant protection for the public



and the physician as much as for the nurse, it was necessary to begin the fight all over again.

MUSHROOM SCHOOLS OF NURSING. Although some physicians, temporarily forgetting regional anatomy, complained that trained nurses "tried to walk like doctors," the graduate nurse became an accepted American institution. By the time of the World's Columbian Exposition, schools of nursing had proved their worth; they were so good for the community that they engendered evil. Private individuals and hospitals operated schools of nursing for personal profit; the pupils did work which saved the management the wages of servants; and, when they were turned out of the hospital, they had little nursing education, but they did have a big diploma. They were graduate nurses in the sense that they had graduated from a so-called school of nursing: the public could not be expected to know that they were more familiar with the broom closet than with the bedside; that the laboratory was locked most of the time because a member of the faculty kept his hound there; and that they had not received instruction on the manikin because it had disappeared last term and had not yet been replaced. Commercial promoters of schools of nursing found that a liberal distribution of pins and badges could serve as substitute for a burdensome curriculum. In addition, American ingenuity (especially in Chicago) devised correspondence schools of nursing: "Learn to be a nurse by mail." The time had come to differentiate the schools of nursing and to admit the graduates of the legitimate schools to examination by the state.

THE LAMP IN THE LEGISLATURE. In the absence of state registration, the nurse graduating from a bogus school or a diploma mill was legally on the same footing as the nurse graduating from a standard course. So the nurses of the nation lit a lamp in the legislature, but it took a decade for it to burn. The battle had to be fought and won in state after state, and even when the victory had been gained in several states, the remaining states were as obstructive as ever. After the Columbian Exposition, it took ten years of intensive struggle in political swamps for the nurses of America to secure their first state recognition. A description of the state-by-state experiences of the nurses in quest of the obvious, the speeches and articles they had to answer, the legal quibbling and

legislative chicanery with which they were compelled to contend, would require a volume of sardonic humor, for it would be an exposure of human folly.

**THE FIRST R.N.** Under the leadership of Mary Lewis Wyche (1858-1936), North Carolina was the first state which passed a law for the registration of graduate nurses. When Josephine Burton registered in Craven County (June 4, 1903), she became the first registered nurse in the United States. She was the first nurse entitled to write after her name, R.N. She became registered by waiver, but the bill provided that next year all applicants for license would be required to appear before the State Board of Examiners of Nurses to be examined in eight subjects: anatomy and physiology; medical, surgical, obstetrical and practical nursing; invalid cookery and household hygiene. The first nurse to become registered in North Carolina as the result of the first examination in Raleigh was Hattie Lowry (May 24, 1904). The indefatigable Miss Wyche kept the records in a little notebook in her own handwriting. It all sounds primitive, but all America followed North Carolina. Today there is not a hamlet in our vast land which has not felt the healing touch of the R.N.

### STATE-ACCREDITED SCHOOLS OF NURSING

**CONTEMPORARY SCHOOLS OF NURSING (1943).** *Alabama:* 107 hospitals, 24 schools of nursing; *Arizona:* 67 hospitals, 4 schools of nursing; *Arkansas:* 70 hospitals, 9 schools of nursing; *California:* 417 hospitals, 45 schools of nursing; *Colorado:* 104 hospitals, 19 schools of nursing; *Connecticut:* 84 hospitals, 23 schools of nursing; *Delaware:* 19 hospitals, 7 schools of nursing; *District of Columbia:* 28 hospitals, 8 schools of nursing; *Florida:* 139 hospitals, 13 schools of nursing; *Georgia:* 134 hospitals, 15 schools of nursing; *Idaho:* 50 hospitals, 8 schools of nursing; *Illinois:* 323 hospitals, 105 schools of nursing; *Indiana:* 147 hospitals, 29 schools of nursing; *Iowa:* 141 hospitals, 32 schools of nursing; *Kansas:* 132 hospitals, 36 schools of nursing; *Kentucky:* 100 hospitals, 17 schools of nursing; *Louisiana:* 90 hospitals, 16 schools of nursing; *Maine:* 72 hospitals, 18 schools of nursing; *Maryland:* 85 hospitals, 26 schools of nursing; *Massachusetts:* 234 hospitals, 74 schools of nursing; *Michigan:* 258 hospitals,



42 schools of nursing; *Minnesota*: 212 hospitals, 34 schools of nursing; *Mississippi*: 105 hospitals, 34 schools of nursing; *Missouri*: 151 hospitals, 33 schools of nursing; *Montana*: 60 hospitals, 15 schools of nursing; *Nebraska*: 107 hospitals, 14 schools of nursing; *Nevada*: 20 hospitals, no schools of nursing; *New Hampshire*: 43 hospitals, 14 schools of nursing; *New Jersey*: 168 hospitals, 47 schools of nursing; *New Mexico*: 63 hospitals, 2 schools of nursing; *New York*: 556 hospitals, 122 schools of nursing; *North Carolina*: 178 hospitals, 48 schools of nursing; *North Dakota*: 48 hospitals, 16 schools of nursing; *Ohio*: 236 hospitals, 67 schools of nursing; *Oklahoma*: 143 hospitals, 13 schools of nursing; *Oregon*: 80 hospitals, 13 schools of nursing; *Pennsylvania*: 356 hospitals, 131 schools of nursing; *Rhode Island*: 24 hospitals, 9 schools of nursing; *South Carolina*: 75 hospitals, 16 schools of nursing; *South Dakota*: 56 hospitals, 12 schools of nursing; *Tennessee*: 119 hospitals, 20 schools of nursing; *Texas*: 406 hospitals, 42 schools of nursing; *Utah*: 39 hospitals, 6 schools of nursing; *Vermont*: 30 hospitals, 10 schools of nursing; *Virginia*: 123 hospitals, 30 schools of nursing; *Washington*: 127 hospitals, 32 schools of nursing; *West Virginia*: 79 hospitals, 30 schools of nursing; *Wisconsin*: 222 hospitals, 20 schools of nursing; *Wyoming*: 28 hospitals, 2 schools of nursing.

CONCLUSIONS. After a brief course in a New England hospital, a diploma was given to "America's first trained nurse"; in that year (1873), the first three Nightingale schools for nurses were established in the United States. The American tempo is without parallel in history, and seventy years later (1943), there were 6,655 hospitals and related institutions in the United States registered by the American Medical Association; 1,411 state-accredited schools of nursing; 110,222 student nurses; 113,424 graduate nurses engaged in nursing; 13,167 other graduate nurses; 17,309 practical nurses; 34,801 nurses' aides; 92,427 attendants, and 31,140 orderlies. In these figures there is the romance of achievement; they sing of the vastness and vitality of America; in their way they are as American as the Wilderness Road trampled by roaming buffalo and wandering Indian, the trail blazed by the ax of the frontiersmen who moved ever westward in the upbuilding of the new nation. The Wilderness Road of nursing has become a highway of modern science.

## XIII

### Notable Nurses of America



#### SKETCHES OF NURSES

HARRIET NEWTON PHILLIPS. In the final chapter of *Women's Work in the Civil War* (Philadelphia, 1867), there is a passing reference to Miss Phillips as one of the "efficient nurses appointed by the Western Sanitary Commission, and there were none more efficient anywhere." The majority of the volunteer nurses of the Civil War returned to their kitchens when the war was over, but Miss Phillips could not forget the days when she attended the sick and wounded in the hospitals of St. Louis. She enrolled in the pioneer Woman's Hospital Training School, and after six months of uncertain instruction received a certificate (1869). For two years, she remained in the hospital as head nurse and instructor. She then resigned to engage in missionary and nursing work among the Indians of northwestern Wisconsin (1871). She returned to the Woman's Hospital Training School to take the more extended course it was then offering (1878). In Pennsylvania records, Harriet Newton Phillips is regarded as America's first graduate nurse, and as the first to take a postgraduate course.

LINDA RICHARDS. A woman in her thirties matriculated in the training school for nurses of the New England Hospital for Women and Children, Boston (Sept. 1, 1872); one year later (Sept. 1, 1873), she received the diploma which invested her with the title of America's first trained nurse. Linda Richards (1841-1930) thus described the event:

The course was for only one year, and embraced training in medical, surgical, and obstetrical nursing, but the kind and amount of instruction was very limited. Twelve lectures were given by the visiting staff of physicians, and



the only bedside or practical instruction we received was from the young women internes, who taught us to read and register temperature, to count the pulse and respiration, and the methods of performing the various duties as they were assigned. Great care was taken that we should *not* know the names of the medicines given. All bottles were numbered, not labeled. We had no textbooks, nor did we have entrance or final examinations. Each nurse was quietly given her diploma as she completed her year of training. Any distinction which has come to me as the first trained nurse in America arises solely from the fact that I was the first to enter the newly organized school, and so the first to graduate from it. . . . It does not seem quite loyal to my school to tell how very little training we received, for every one in authority gave us of her best nursing knowledge.

It is true that Linda Richards knew little about nursing in those days, but since others knew less, she was overwhelmed with offers upon her graduation. In the first place, her alma mater requested her to remain as head nurse; the Massachusetts General Hospital, whose cornerstone was the circular letter of James Jackson and John Collins Warren, invited her to take charge of its newly organized training school; the Hartford Hospital of Connecticut offered her the position of head nurse in the surgical ward; and the new school of old Bellevue Hospital wanted her as night superintendent. It was sensible of Miss Richards to go to Bellevue, for it gave her the opportunity to work under Sister Helen. At the New England Hospital, the nurses did not wear uniforms, the only rule being that their dresses must be washable. It was at Bellevue that Miss Richards first saw the white caps.

In the little New England Hospital there were no wards, and Miss Richards had come in contact only with private patients from good families. In Bellevue, she found herself in the midst of a pauperized and alcoholized population, and it took some time before her aversion for the submerged citizens of New York changed to affection. Since she was the night superintendent, she was regarded as the harbinger-of-night, and as soon as she appeared in the wards, the gas was turned so low that she could not do any nursing without a lighted candle ("only two candles a week were allowed each ward"). At midnight, irrespective of the weather, the steam was turned off, and cold forms huddled beneath gray blankets; at three in the morning, the steam was turned on again, and there came such a roaring through the pipes that the entire ward awakened. At five in the morning, the night watch passed and turned off all the gas, leaving the ward in total darkness; even shadows

could not be seen, though now and then one of them fell with a thud, for invisible patients were gliding out of bed and misbehaving.

When Miss Richards was placed in charge of the three maternity wards on the upper floor of the hospital, she noticed that the lying-in women waiting for delivery were working: they were sewing shrouds. Miss Richards wondered whether they wondered if they were sewing their own shrouds. This intrusion of death on the threshold of birth occurred in the good era of Bellevue, in the days of the good women, Mrs. William Henry Osborn, Mrs. William Preston Griffin, Mrs. Robert Woodworth, Mrs. Lucius Tuckerman, Mrs. Joseph Hobson, in the enlightened reign of good Sister Helen. Miss Richards also noticed that the lying-in women were dying at an appalling rate from puerperal fever; despite the discovery and demonstration by the martyred Semmelweis, the mothers at Bellevue were still exposed to contagion in a surgical hospital, attended by the unsterile staff from the surgical wards.

Miss Richards made three contributions to nursing during her Bellevue year: she insisted on light in the night; she instituted written case histories instead of verbal reports, which meant that Bellevue finally (1874) caught up with Hippocrates (5th cent. B.C.); and she exposed the mortality of the mothers, which caused their removal to the safer region of Blackwell's Island. Sister Helen was tight-lipped in praise, but at the end of the year she asked Miss Richards to remain in Bellevue as assistant superintendent, which was praise enough from Sister Helen. Miss Richards, however, had become keenly interested in training school organization, and therefore she left Bellevue "with sincere regret," but no doubt, although she did not say it, with considerable relief.

Miss Richards now heeded the plea of the Massachusetts General Hospital, and organized its training school of which she became the first superintendent (1874-77). Always a student, she managed to spend six months abroad (1877), where she worked as a resident visitor in St. Thomas's Hospital, King's College Hospital, and Edinburgh Royal Infirmary. At St. Thomas's Hospital she observed that each nurse was allowed a glass of beer at lunch, dinner, and supper, but it did not occur to her to introduce this custom into America. She met the leaders of the nursing world: William Rathbone; the matron, Mrs. Wardroper, who could write fluently while wearing her black gloves; Mary Crossland, who created the post of Home Sister of the Nightingale Home; and,



in fear and trembling, the otherwise courageous Miss Richards received a summons from Florence Nightingale. Her apprehension was transformed to intense joy when she looked into the face of the mother of her profession. Miss Nightingale wrote to her pupil, Matron Pringle, at Edinburgh:

A Miss Richards, a Boston lady, training matron to the Massachusetts General Hospital, has in a very spirited manner come to us for training for herself. She would have taken the ordinary year's training with us, but her authorities would not hear of it, and we admitted her as a visitor. I have seen her, and have seldom seen any one who struck me as so admirable. I think we have as much to learn from her as she from us.

Upon Miss Richards' return to America, Edward Cowles (1837-1919) stared at her through his pince-nez, and while smoothing his well-trimmed mustache, impressed it upon her that it was her duty to organize, from its foundation, the training school of the hospital of which he was superintendent. So Linda Richards became matron of the hospital and founder-superintendent of the training school of the Boston City Hospital (1878). Cowles was a physician with social vision, but when Miss Richards first made her rounds she walked through a jungle of prejudice. The house staff was satisfied with the old servant-nurses, and did not believe nurses should be or could be trained. Why clumsy young internes should feel that a woman could not learn to prepare dressings properly, may not be understood by the present generation of internes, unless they remember that the human mind, particularly if educated in Boston, is disinclined to innovation. Before the year was over, the same doctors who had condemned a training school in the Boston City Hospital were saying they did not see how a hospital could be run without a training school. When Miss Richards came back to the school, after a prolonged absence due to illness, there had been so many improvements in the interval that the founder felt like a stranger.

Linda Richards heard of Japan, the beautiful toyland of cherry-blossoms and tropical butterflies, where doll-like women wore kimonos all day and poured the tea of paradise for strangers. Linda Richards heard that Japan required a training school for women nurses, but she did not want to go; and if she went she did not want to stay. Linda Richards went to Japan as missionary and nurse, remained for five years (1885-90), learned the language, organized the earliest training

school in the islands of the Orient, and gave to the soul of Yamato its first white caps. When Linda Richards handed out four diplomas to four well-trained girls, they became the first graduate nurses of Japan (1888). Miss Richards never forgot the politeness of the Japanese government. Soon after her arrival, she began to work in the cholera hospital—the authorities thanked her profoundly, excused themselves profusely, but explained that, as she was a foreigner living under a passport which promised her safety, she could not be permitted to venture into danger. They published the incident in the newspapers, so the whole empire could express its gratitude to the noble foreign woman who had come from a distant land to help the Japanese. Throughout her sojourn she was guarded, and reached America in safety.

In her direct way, Linda Richards used to say: "It stands to reason that the mentally sick should be at least as well cared for as the physically sick." In collaborating with Edward Cowles, she became the pioneer nurse of the insane. She served as matron in institutions of the insane, and in her old age she organized training schools in hospitals for the mentally ill in Taunton, Worcester, and Kalamazoo. It is greatly to the credit of Miss Richards that, although her own curriculum was limited, for half a century she was the champion of more adequate education for the nurses of the future. In returning to her alma mater as superintendent of the New England Hospital for Women and Children, she who had gone forth as the first graduate, now had the happiness of seeing the training school course extended to three years and modernized according to the latest standards.

The life of Linda Richards was long and full, but, in her modesty, her autobiography was brief: her little book, *Reminiscences* (Boston, 1911), belongs, at some time or other, beneath the pillow of every trained nurse in America. At the Linda Richards centennial in Boston (July 27, 1941), there was a remarkable outpouring of nurses; the Linda Richards Collection was dedicated as a sanctuary in the Goddard Home for Nurses in the New England Hospital, and the woman who had been born in the village of Potsdam, New York, one hundred years ago, was hailed as the Mother of American and Japanese Nurses.

CLARA WEEKS. A Rhode Island schoolteacher before she became a nurse, Clara Weeks, graduate of the school of nursing of New York Hospital



(1880), organized the school of nursing at Paterson (N. J.) General Hospital, where she was superintendent of nurses (1883-88) until she retired as Mrs. Shaw. She lived sixty years after her graduation, and despite the brevity of her career in active nursing, her name remained familiar as the author of *A Textbook of Nursing* (New York, 1885). It is of interest to recall that the Introduction was written by Edward Livingston Youmans, at that time the foremost American popularizer of science. The first textbook on nursing by an American nurse, this useful compilation entered into the basic course of training, and deserved its wide distribution. Copies of subsequent reprints were seen everywhere, including the second-hand bookstalls. In the sense that earlier Americans were educated by Webster's blue-backed Speller and McGuffey's much-thumbed Readers, our first generation of trained nurses grew up on Clara Weeks.

ISABEL ADAMS HAMPTON. Born in Canada (Welland, Ontario) of English parents, a schoolteacher in her teens, a graduate of Bellevue (1883), superintendent of the Illinois Training School (1886) at twenty-six, Isabel Adams Hampton (1860-1910) was not yet thirty years of age when she was chosen to organize the school of nursing of Johns Hopkins Hospital. Miss Hampton's advent at Hopkins created a sensation. It was noted that she looked serene and beautiful whenever she came into a room, although she had dressed in three and a half minutes. Her fellow-Canadian, William Osler, said she entered Hopkins "like an animated Greek statue." Miss Dock of Bellevue went to Baltimore to assist Miss Hampton, and retained this picture of her:

I thought I had never seen a more beautiful or majestic figure except on the pedestal of some classic sculpture. Miss Hampton's color was rich and fresh, her eyes the clearest blue, unusually large and beautifully set and opened; her voice was one of her greatest charms, being very sweet and quiet, yet with a certain thrill in it when she was in earnest. Her hands were also extremely beautiful, displaying her character and power of organization. They were perfect enough to have been modeled.

From all accounts, male and female, Miss Hampton was indeed a Venus in the flesh.

It may not be exciting to read that Miss Hampton introduced the graded system of nursing theory and practice in the Illinois Training

School; that she obtained for her pupils the advantage of affiliation with the Presbyterian Hospital of Chicago; that she planned the nursing program at the World's Fair; that she sponsored the affiliation of organized nurses with the Red Cross; that she helped secure the passage of the bill for the Army Nurse Corps; but these are the steps by which a profession reaches new heights. Miss Hampton's brilliant success as principal of the school at Johns Hopkins Hospital (1889), her efforts in founding the first (1893) and the second (1896) national nursing organizations, her idea of university education for nurses which originated the course at Teachers College (1898), and her campaign for the state registration of trained nurses (1899), made her the undisputed leader of American nursing in the last decade of the nineteenth century.

Miss Hampton's "Educational Standards for Nurses" (*Trained Nurse*, 1893) and "Hospital Economics" (*American Journal of Nursing*, 1900) were among her contributions to professional periodicals. Miss Hampton was the author of two influential books: *Nursing: Its Principles and Practice* (Philadelphia, 1893) and *Nursing Ethics* (Cleveland, 1901). In explaining why a nurse should wear the white cap of her school and not some other cap, Miss Hampton said, "A Yale graduate may regard crimson as a very handsome color, but he is hardly likely to wear a Harvard cap with the rest of his Yale costume." Nothing further need be said on the subject, and this was a sample of Miss Hampton's ability to penetrate at once to the core of a problem. When Miss Hampton remarked that without health a nurse's work must cease and the order of things is reversed, for she becomes the patient instead of the nurse, her pupils undoubtedly vowed to dedicate themselves to Hygeia.

A new chapter in Miss Hampton's life began at St. Margaret's, Westminster, London, where she was married to Hunter Robb (1894). The radiant bride carried a beautiful bouquet of flowers, the gift of Florence Nightingale. The couple settled in Cleveland, where Doctor Robb was professor of gynecology at Western Reserve University. Miss Hampton was compared so frequently to a Greek goddess that the old Greek adage should have been remembered: "Whom the gods love die young." On a spring day, in the full prime of her loveliness, she was suddenly deprived of life by an accident. Her name survives in the Hampton House of Johns Hopkins Hospital: it is a privilege for any woman, and doubly so for any man, to be conducted through this building, a "no



man's land" of white caps, a modern convent of science, where five hundred Hopkins nurses live in the memorial to Isabel Adams Hampton.

CAROLINE HAMPTON. During Thackeray's first visit to the United States (1852), he stayed in the brownstone house of the Baxters in New York. There he met Sally Baxter, aged nineteen, and the author of *Vanity Fair* said she was the wittiest and loveliest woman in America. On Thackeray's second visit to the United States (1855), Sally Baxter was mistress of a plantation in South Carolina, for she had married Frank Hampton, younger brother of the mighty Wade Hampton. Seven years later, Sally Baxter Hampton was dead, aged twenty-nine. In the following year, Frank Hampton, a Confederate officer in the Civil War, was killed (Brandy Station, 1863). The Hampton property was in the path of Sherman's march to the sea, and it was destroyed. Thus disappeared a seemingly favored couple, leaving to fate their little children, the youngest being Caroline Hampton.

Three paternal aunts brought up Caroline Hampton, with an occasional nod from Uncle Wade, symbol of South Carolina: lieutenant-general in the Civil War, and destined to become governor of his state and United States senator. Caroline went to a school in Virginia which was under the direction of a great-granddaughter of Thomas Jefferson. Then she returned to the remains of the family property, Millwood, near Columbia, South Carolina, and to their land near Cashiers, up in the mountains of North Carolina. The high-spirited Caroline rode horses with the traditional Hampton skill, and played with dogs. But one cannot live with three "Aunties" eternally, even with the aid of horses and dogs. Caroline Hampton needed something to do, and a generation before Florence Nightingale had shown the way by dragging nursing out of the depths and elevating it to so high a plane that it appealed even to such an aristocrat as Caroline Hampton. She kissed her aunts good-by, and came to New York. She entered Mount Sinai Hospital, but changed to the New York Hospital, from which she was graduated (1888). Within a short time she was in Baltimore, as head nurse of the surgical division of the newly opened Johns Hopkins Hospital (1889).

It was a coincidence that in the early days of the hospital there

should have been two Miss Hamptons, for there was no relationship between Caroline Hampton and Isabel Hampton. The Hampton girls were striking specimens of pulchritude, and both exhibited the imperiousness which sometimes accompanies female beauty; both were nurses, interested in the same cause; and they should have worked together in harmony for the welfare of the hospital. Instead, there were manifestations of an intense animosity between them. Caroline Hampton of the planter Hamptons, had no intention of taking orders from an upstart Canadian by the name of Hampton, just because she happened to be superintendent of nurses and principal of the training school. Peace was kept by Halsted, a surgeon who had come to Baltimore from his native New York. Halsted was bald and near sighted and had prominent ears. He appointed Caroline head nurse in his operating room, a diplomatic technique which made her independent of Isabel.

William Stewart Halsted (1852-1922) was then thirty-seven years of age, and had already undertaken investigations and achieved discoveries which placed his name in the first rank of modern surgeons. The profession was learning his method of intradermal and neuro-regional anesthesia (nerve blocking), but few knew that in experimenting with cocaine when its fatal power of enslaving the human will was unknown, Halsted was one of its victims. A secret patient in hospital and on ship-board, with Welch hovering over him like a protecting spirit, Halsted was one of the few who have succeeded in liberating themselves from the terrible bondage to the drug.

Having advanced the frontiers of anesthesia, Halsted now made a fundamental contribution to antisepsis. Halsted's first reference to his introduction of rubber gloves into surgery was published in the *Johns Hopkins Hospital Reports* (1890-91, Vol II, p. 398). On a later occasion, Halsted again referred to the subject: "In the winter of 1889 and 1890—I cannot recall the month—the nurse in charge of my operating room complained that the solutions of mercuric chlorid produced a dermatitis of her arms and hands. As she was an unusually efficient woman, I gave the matter my consideration, and one day in New York requested the Goodyear Rubber Company to make as an experiment two pair of thin rubber gloves with gauntlets."

Did Halsted intend to mislead his readers? It may be true that the nurse in question was "an unusually efficient woman," but that is not



why Halsted slipped away to New York to the Goodyear Rubber Company. Halsted was austere, unapproachable, and exceedingly busy, and was not apt to leave town because an efficient nurse had a sensitive skin. It all happened because the nurse was Caroline Hampton, and she meant more to Halsted than anything else in life. Members of her family did not see how a Hampton could marry a Yankee doctor, or anyone not in the planter class, but as Caroline resigned from the hospital (1890), it became evident that she intended to become Mrs. Halsted. The nursing career of Caroline Hampton was brief, but her influence is enduring. To protect the hands of the nurse he loved, Halsted devised the rubber glove. Caroline Hampton was the first to wear sterilized gloves, since worn wherever operations are performed: the thin and seamless gloves which have saved from infection countless surgeons, nurses, and patients.

ROSE HAWTHORNE. The woman who stands in the harbor of New York, facing the sea with upraised torch, welcoming the ships from every shore, is named Liberty Enlightening the World: on the base of her statue is inscribed one of the noblest sonnets in the English language, appropriately written by a woman of New York, named Emma Lazarus (1849-87). The genius of Emma Lazarus flowered early: in her youth her poems were commended by William Cullen Bryant and admired by Ralph Waldo Emerson; her prose was praised by Turgenev. Miss Lazarus, absorbed in general culture, had not been interested in the historic problems of her people. She knew Greek and Latin, but not Hebrew. Ancient Hellas fascinated her; Palestine bored her. Despite the reproach of the poet Stedman and the remonstrance of John Burroughs, she kept aloof from Jewish themes. In the 1880s, however, the czarist persecutions and pogroms brought swarms of Russian Jews as refugees to New York, and the ardent Hellenist was transformed: the Hebraic fire awoke within the soul of Miss Lazarus. She studied Hebrew, and wrote the fervent appeals which made her known to the world as a leading apostle of her race.

In the literary salon of Richard Watson Gilder and his wife Helena de Kay, the poetess Emma Lazarus met the poetess Rose Hawthorne Lathrop (1851-1926). It was a meeting of two gifted women, one of pure Sephardic stock, the other a richly endowed child of the Puritans.

Rose Hawthorne Lathrop, "the Rose of all the Hawthornes," the daughter of America's foremost romancer and of a rare mother, the wife of the poet who will always be remembered as the author of the lyric beginning, "The sunshine of thine eyes," was herself a writer of distinction. The friendship which developed between these two women was intense and brief, for the youthful Jewess, who had been adored in the studio-home of the Gilders, abruptly disappeared from its soirées. Emma Lazarus, in her prime, was stricken with cancer.

Mrs. Lathrop learned of another case of cancer: a seamstress, operated upon in a hospital and pronounced incurable, was shipped the following day to Blackwell's Island. The daughter of Nathaniel Hawthorne and of Sophia Peabody could not help contrasting the two cases: she grieved deeply for the quenched genius of Emma Lazarus, but all her pity went out to the seamstress. Both died of cancer, yet in circumstances that were vastly different. Miss Lazarus was surrounded by loving relatives and affectionate friends, attended by private doctors and nurses, with every comfort that wealth could procure, every alleviation that science could furnish; the nameless seamstress, sensitive and refined but penniless, died in the hell of an almshouse on Blackwell's Island, friendless and alone. The story haunted Rose Hawthorne Lathrop, and she, too, disappeared from the world.

A new Dominican religious, to be known in time as Mother Alphonsa, lived in the slum-heart of the Lower East Side of New York City (1896). Tall visitors to her little flat looked to the nun like eagles in a canary-cage. The nun established in her tenement the most exclusive of organizations: only the destitute with incurable cancer could enter. It so happened that Alice Huber, a Kentucky girl, read of Mother Alphonsa's work among the cancerous poor, and decided to pay her a visit. She found herself in the midst of extreme poverty; the rain leaked through the ceiling; the walls were filled with bugs; the dying patients were loathsome. Unbearable disgust overwhelmed Alice Huber, and she felt she could not endure this misery and ugliness for a single afternoon. Before she said good-by, Miss Huber looked again at the nun who wore a nurse's dress, for the nun-nurse had taken a course in the New York Cancer Hospital: she was beautiful and cheerful and happy, and diffused a wholesome joy among her patients. Alice Huber, destined to become Mother Rose Huber, remained forever with Mother Alphonsa,



"her earliest companion and her chosen successor." The nameless seamstress had not died in vain: Rose Hawthorne Lathrop was Mother Alphonsa.

Mother Alphonsa founded the Dominican sisterhood known as the Servants of Relief for Incurable Cancer. As her work expanded, she moved from 668 Water Street to 426 Cherry Street, which she named St. Rose's Free Home, after the first saint of the New World, Rose of Lima, Peru. The work grew year by year; the little house on Cherry Street was closed, to be replaced by a modern fireproof hospital on the corner of Front and Jackson streets, from whose roof can plainly be seen the Statue of Liberty in the great harbor. For the first time, accommodations were available for male patients in the new building. Without distinction of race or creed, of color or sex, there was only one passport to St. Rose's Free Home: poverty with cancer. Mother Alphonsa placed Mother Rose Huber in charge of the new building, for she was occupied elsewhere.

With the opening of the new century, Mother Alphonsa established the Rosary Hill Home in the village of Hawthorne, New York (1901). An old, cancerous German woman had been sent to the almshouse on Blackwell's Island, as the wives of her sons could no longer tolerate her presence; she was brought to the Home, and though rescued, she remained embittered; with her Lutheran prayer-book in her lap, she set her aristocratic old face in an inflexible mold, and would not even look out at the sunshine. One of the Sisters, fertile in expedients, remembered a splendid second-hand donation, a handsome, black satin dress. She gave it to Grossmutter to put on, and then asked her if she would walk out in it. Up jumped Grossmutter from her chair, and wandered through the garden. After that it was necessary to watch her, for even when the weather was cold and damp, Grossmutter would fumble her way down the stairs and steal out of doors in her satin gown.

At the Rosary Hill Home were summer-house and greenhouse, and many buttercups and daisies, with fields of goldenrods and asters; here life was prolonged by care and every nursing comfort, and the last days were spent in a haven of peace; the patients learned that the flowers did not shrink at their approach, nor did the ducks and chickens shudder at their half-eaten faces and awful stench; the trees bore fruit for

them, and Mother and the Sisters loved them; they were outcasts of society because of their terrible affliction, but they were honored guests in the Home. They were human enough to know their privileges, and the poorest of them made many querulous demands, often unreasonable or impossible of fulfillment, yet in the face of pain and disfigurement, their jests and laughter resounded through the Home. The Rose Hawthorne Lathrop in Mother Alphonsa had not forgotten the use of words, and she said, "To see a destitute incurable cancer patient full of delight and crying out in thanksgiving and contentment is a remarkable sight indeed." During the last thirty years of her life, this remarkable sight was seen many times by all who witnessed the work of the good hands of Mother Alphonsa.

ANNA CAROLINE MAXWELL. The name of Anna Caroline Maxwell (1851-1929), founder of the school of nursing of Presbyterian Hospital of New York (1892), is more intimately connected with this institution than is its cornerstone. During the thirty years in which she guided the nursing of a great hospital, her hair grew white, and she became an international figure as the senior superintendent of nurses in the United States. She looked so stately behind her desk that one was apt to forget the episode of storm-and-stress in her life. The story of sanitation in the brief Spanish-American War (1898), is one of the dark chapters in American history. Spanish bullets were harmless playthings in comparison with the deadliness of typhoid bacilli. Isabel Adams Hampton, president of the Associated Alumnae of Trained Nurses of the United States and Canada, and the recognized leader of American nursing, was ignored, while nursing was placed under the direction of the Daughters of the American Revolution, a selection which would have been facetious, had the results been less disastrous.

After numerous personal appeals to the surgeon general, Miss Maxwell was appointed chief nurse at Sternberg Hospital, Camp Thomas, Chickamauga Park, Georgia. Fifty thousand American volunteers were there encamped, and found too late they had ventured into a medieval plague. Buckets stood in typhoid-saturated trenches, over which swarmed millions of flies. The water that was brought to the camp in hogsheads was insufficient, and there was no chloride of lime or other disinfectant; a laundry in near-by Chattanooga agreed to do the wash, and sent a



boy in a mule-cart to take away heaps of bacilli-laden linen. The soldiers had rushed to the colors, thinking they were going to fight the Spaniards and liberate the Cubans; no one told them they could die in America of fecal matter. Miss Maxwell, a woman familiar with death, wrote: "Sick and dying men lay unattended exposed to the sun's rays, beyond the limits of the tents, covered with flies. . . ."

A train had brought necessities to the camp, but they had not been unloaded, for the commissary at Chickamauga—the ghost of Miss Nightingale's purveyor in the Crimea!—explained that work was suspended for the day as it was six o'clock, and moreover the utensils could not be utilized until they were inventoried. The imbecility of the situation was too much for Miss Maxwell, and she informed the authorities she would open the cars by force unless she received the supplies immediately: her wrath cut the red tape, and lines of her nurses carried the bedpans from the cars to the tents. Late in the summer, when the regiments departed, the commanding officer deprived Miss Maxwell of orderlies, though hundreds of sick remained behind. By reason of her personality Miss Maxwell was a commanding officer herself, and she knew what to do: she was willing to overwork her nurses in an emergency, but refused actually to kill them. She announced that if she did not get the orderlies at once, she would withdraw her nurses within twenty-four hours. Before the expiration of her ultimatum, the orderlies suddenly appeared in camp.

At Chickamauga, Miss Maxwell discarded the hogsheads of water for a pipe line, and pursuing a hint from a member of the engineer corps, installed a hot-water plant within thirty-six hours. Without laurels from the authorities, she demonstrated how modern nursing reduces the death rate in typhoid. At the close of the Spanish-American War, she returned to her desk at the Presbyterian. During the first World War she visited about seventy British, French, and Belgian hospitals, several at the front; for her services as head of the Presbyterian Hospital unit overseas, she was decorated by the French Republic. She received the honorary Master of Arts from Columbia University (1917). Anna Caroline Maxwell reached venerable years, a revered figure in the nursing world. In the Columbia-Presbyterian Medical Center of New York, her name survives in the impressive Maxwell Hall of the School

of Nursing. For her epitaph, the following is appropriate: when there was life to be saved, she did not know when it was six o'clock.

LYSTRA GRETTTER, born in Canada of Swiss-Dutch parents, a resident in her girlhood of North Carolina, a graduate, during her widowhood, of the Buffalo Hospital Training School for Nurses (1889), was called to Michigan as principal of the Farrand Training School for Nurses in connection with Harper Hospital of Detroit. At the Farrand, she originated the eight-hour day for nurses (1891) and inaugurated the alumnae association of the school; founder of the first organization for the graduate nurses of the training schools of Detroit, first president of the Michigan State Nurses Association, leader of the campaign for the state registration of nurses in Michigan, superintendent of the Visiting Nurse Association of Detroit, state chairman of Red Cross Nursing Service, initiator of the cooperative graduating exercises of the hospitals of Detroit known as the Nurses Community Commencement, and sponsor of the chair of Public Health Nursing in the University of Michigan, it was inevitable that she should be recognized as the Dean of Michigan Nurses.

It is sometimes assumed that the Florence Nightingale Pledge was written by the Mother of Nurses herself, but its author was Lystra Gretter, and it was first administered to the graduating class of the Farrand (1893). The Florence Nightingale Pledge, a modified Hippocratic Oath, is as follows:

I solemnly pledge myself before God, and in the presence of this assembly, to pass my life in purity and to practise my profession faithfully. I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession, and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician in his work, and devote myself to the welfare of those committed to my care.

MARY LEWIS WYCHE. The first three women from North Carolina who went into training, entered America's oldest hospitals: Jane Christmas Yancey (Bellevue Hospital, 1877), Fannie Buxton (Bellevue Hospital, 1883), and Evelina MacRae (Philadelphia General Hospital, 1884). After



graduation, they were lost to their native state, since they practiced outside its borders. Before the Tar Heel State had training schools of her own, the first three daughters of North Carolina who went north to graduate, but returned and remained, were Adelaide Orr (New York Infirmary for Women and Children, 1888), whose work among the female prisoners of Buncombe County caused her to be known as the Angel of Buncombe Prisoners; Mollie Spach (St. Luke's Hospital, Bethlehem, Pennsylvania, 1889), who became superintendent of the City Memorial Hospital of Winston-Salem; and the British-born Mary Rose Batterham (Brooklyn City Hospital, 1893), the leading figure in the public health of Asheville.

Mary Lewis Wyche (1858-1936) of Henderson, North Carolina, a pupil and teacher in Henderson College, settled in Chapel Hill to make a home for her brothers at the University of North Carolina; to help these younger members of her family, she kept boarders and taught students—a conjunction which may be regarded as the acme of sisterly devotion. She was a mature woman of thirty-six when she graduated from the Philadelphia General Hospital (1894). In July of that year she was appointed head nurse of the Rex Hospital of Raleigh, and in October inaugurated its training school. The school was within sound of the twenty-three beds of the little institution: when the bells of the hospital rang, the nurses left the classroom to respond. A quartette (Rosa Gilmore Hill, Bessie Mordecai, Eva Palmer, Elizabeth Purnell) constituted the first graduating class of North Carolina's first training school for nurses.

Aside from periods of private duty nursing, Miss Wyche was superintendent of Watts Hospital in Durham, and of Sarah Elizabeth Hospital in Henderson; she suggested the pre-nursing course at the North Carolina College for Women at Greensboro, and sponsored the university course at Duke University School of Nursing. In the meantime she had organized the Raleigh Nurses Association (1901), followed by the North Carolina State Nurses Association (1902): under her leadership, North Carolina became the first state in the Union which made the registration of graduate nurses compulsory (1903). Having molded, beyond any other individual, the nursing history of her native state, she began to write it in her last decade: her book, *The History of Nursing in North Carolina* (Chapel Hill, 1938), edited by Edna L. Heinzerling,

and published posthumously by the University of North Carolina Press, was the last testament of Mary Lewis Wyche, the mother of modern nursing in North Carolina.

EMILY LEMOINE LOVERIDGE. "Miss Brennan of Bellevue," was once a familiar phrase in nursing circles. Agnes S. Brennan, an alumna of the Bellevue school (1882), later its immaculate and indomitable superintendent (1888), knew how to behave, and how to wear a uniform, and expected her students to do likewise. Her special despair was a minister's daughter, Emily Lemoine Loveridge (1860-1941), of Hammondsport, New York, a former schoolteacher who had decided to become a nurse. When a patient asked for anything Emily raced through the wards, her hair disheveled, her uniform bunched up, and her cap defying the law of gravity and Miss Brennan's regulations. Her interest in her work was transparent to all, including the superintendent. With Miss Brennan's blessing and perhaps to her relief, Miss Loveridge was graduated from the Bellevue School of Nursing (1889). New York was too confining for Miss Loveridge, and she sought the limitless West. She established in the Good Samaritan Hospital of Portland, Oregon, the first school of nursing in the Beaver State (1890). Fifteen years later, she was appointed superintendent of the hospital, and aided in its development from a two-story wooden house to a metropolitan institution, affiliated for clinical instruction and nurse training with the University of Oregon Medical School.

A founder of the Western Hospital Association, after her retirement, she was its scheduled guest of honor in San Francisco. Weak, sick, feverish, Miss Loveridge would have ordered any of her patients to bed under such circumstances, but it was characteristic of her that she attended the banquet and made the expected speech. The following morning she entered a San Francisco hospital, from which she was transferred to her Portland hospital. This was her real home: here her work had begun, and here renal disease concluded her career. More than a thousand persons attended the final reunion and farewell, among them two old ladies: one was a graduate of the first class, and the other of the second class, of the School of Nursing of the Good Samaritan Hospital. A hundred physicians, and 125 nurses in uniform, marched



in the funeral procession. Hers was a good life: fifty years before taps sounded over her grave, she introduced trained nursing in the Pacific Northwest.

HENRYETTA ZIEGELER. In 1900, Tulsa in Indian Territory had a population of 1,390; in the following year, a discovery was made in Tulsa, and the boom changed the village into "the oil capital of the world." Tulsa lacked hospitals, and few of its homes were large enough to isolate an infectious patient from the family. When an epidemic of smallpox raged through this section of Indian Territory, a citizen of the Creek Nation, Fred Severs Clinton, who entered the practice of medicine under the preceptor with whom he had drilled the first commercial oil well in the region, converted a six-room cottage in an apple orchard, near Greenwood and Archer Street, into the first hospital in Tulsa. No graduate nurses were then available, and this isolation hospital was soon discontinued. Five years later, although population and patients continued to increase, there was neither hospital nor sanatorium within fifty miles of Tulsa.

It was time for Clinton, one of the chief promoters of the Indian Territory Medical Association, later merged into the Oklahoma State Medical Association, to act again: he founded the Tulsa Hospital Association, which established the Tulsa Hospital and the Tulsa Hospital Training School (1906). Clinton, a man of generous soul and lover of Tulsa, sang his venture in the following language:

There may be nothing in a name, especially a name unknown and unsung, but Tulsa is a name that charms and may be used to conjure with. The supporters and financial backers of the Tulsa Hospital Association have given of their mind, time and money to make matchless the magic name—Tulsa—and with pardonable pride place two new stars, The Tulsa Hospital and The Tulsa Hospital Training School, beside the other glittering gems in the sparkling diadem which adorns the beautiful brow of the coming metropolis of the Southwest.

All Tulsa was now tense with expectation, for Clinton had announced in the local newspapers the coming of the superintendent of nurses, and Tulsa had never seen a graduate nurse. A native of Holland, born in a village near Leyden, Henryetta Ziegeler moved in her childhood to Haarlem where she graduated from Junior Women's College, studied

music and received her diploma as music teacher. Like most educated Europeans, she knew several languages. She taught until she had sufficient funds to join her sister who was studying medicine in Baltimore. She spent about a year in the Peabody Conservatory, for she intended to remain in the music world. It so happened that during the summer months, there was an outbreak of typhoid fever and a shortage of nurses in the hospital connected with the Woman's Medical College of Baltimore. It was characteristic of Miss Ziegeler that she offered to help out, and unknowingly the volunteer stepped into a new career: she gave up her music, and decided to become a nurse.

Her first course was in the Lying-in Hospital of Philadelphia, but not content with one branch of nursing she enrolled in the University of Pennsylvania School of Nursing; after graduation (1900), she remained three years as head nurse of the children's ward in her alma mater, and then had charge of the Red Bank Sanatorium for Children in New Jersey, and served as superintendent of the Sanatorium for Tuberculosis at Malvern, Pennsylvania. Familiar with one section of her adopted country, Miss Ziegeler turned to the West, while Doctor Clinton was looking toward the East: because there had been an epidemic of typhoid in Baltimore, a woman born in a Dutch village became the first superintendent of the first chartered hospital and training school for nurses in Tulsa, Indian Territory. There were four graduates in the first class (1907) of Tulsa Hospital: Sallie Birnie, Etta McAllister, Irene Richards, Kate Scott.

The humanitarian zeal of Clinton gave a third institution to his city, and although the Isolation Hospital (1900-01), Tulsa Hospital (1906-28), and Oklahoma Hospital (1915-30) no longer exist, they remain of interest as the first hospitals in Tulsa. Miss Ziegeler was a charter member of the Oklahoma Hospital, and the superintendent of its training school. Nurses had once slept in closets and under the cellar stairs, but times had changed: a special room with a sleeping porch on the south side was built for Miss Ziegeler, and all her nurses were comfortably housed within the hospital. Modest to self-effacement, Miss Ziegeler was nevertheless prominent in the organization of the Tulsa County Association of Registered Nurses, and was its hostess at the first meeting (1913). In a larger sense, she was hostess to all the trained nurses of Tulsa, and



thus played an important part in the nursing history of the new state of Oklahoma.

MARY AGNES O'DONNELL. Prior to the American occupation of Cuba, the hospitals of Havana had been architecturally picturesque, but they had belonged to the dark ages of sanitation. As Lucy Quintard said, "They were dens of immorality and uncleanness in every form. . . . In some places, clothes were washed in the rivers without previous disinfection, to breed disease wherever the river water was used." As pointed out by M. Eugénie Hibbard:

The nursing service of the Sisters in the hospitals had been of a religious rather than a professional nature . . . they were directly influenced by the Church, and owing to their vows were unable to perform effectively the duties of nursing. The pillow and sheet shams which decorated the patients' beds on saints' days were beautifully embroidered and lace trimmed. No doubt great pride was taken in this department, but in actual nursing the Sisters' duties consisted principally in distributing wine and soup to the very sick ones, and praying beside the dying.

When the Americans moved in, the Sisters were recalled to their mother houses in Spain.

Mary Agnes O'Donnell, of Saugerties, New York, a graduate of Bellevue School of Nursing (1892), first directress of the school of nursing of Charity Hospital of New Orleans (1894), served in the Spanish-American War, and was released from the army to organize, in Our Lady of Mercy Hospital, the first school for nurses in Cuba. As the native nurses had no manual, she translated Isabel Adams Hampton's textbook (*Nursing: Its Principles and Practice*) into Spanish. She worked thirty-four years for Cuba, where she was regarded as the "teacher of teachers," since so many of her Cuban pupils became teachers in their turn. During a celebration of the National Nurses Association of Cuba, a government official pinned the Great Cross of the Order of Carlos Finlay on her blouse. Before her time, the word *enfermero*, nurse, was a term of disdain, since only the lowest of Cubans would agree to attend the sick; she changed the despised word into a title of honor which only graduate nurses were permitted to use. Mary Agnes O'Donnell, with Lucy Quintard and M. Eugénie Hibbard, formed the triad who modernized nursing in Cuba.

JANE ARMINDA DELANO (1862-1919), of Townsend, New York, was an infant in her cradle when her young father picked her up for a last kiss and disappeared in the Civil War. He never came back, and his grave was never found. Years later, looking over his belongings, Jane sighed, "Why, he was just a boy." After teaching a country school for two terms, Jane realized that she was not intended to be a pedagogue. She graduated from the Bellevue School of Nursing (1886), and soon heard the Call. She wrote a note to her mother, "My dear, dear Mother, forgive me, but I must go." There was a recurrent epidemic of yellow fever in the South, and Jane met her first test as superintendent of nurses at Sandhills Hospital, Jacksonville, Florida. She next appeared as a visiting nurse in a mining camp in Bisbee, Arizona, organizing a hospital for the pioneers, and in constant attendance upon adults and children during an outbreak of scarlet fever.

Positions of responsibility followed: superintendent of nurses at the University of Pennsylvania Hospital School of Nursing (her "six quiet years"); director of Girls' Department, House of Refuge, Randall's Island, New York; director of Bellevue School of Nursing. She resigned from her alma mater to nurse her aged mother. After her mother's death, her sister Ada having also passed away, Jane was the last of her line. She lived in a little apartment on Morningside Heights, and sometimes rode uptown on the elevated with friends; on one occasion she remarked to Mary Elizabeth Gladwin, "My active connection with nursing is at an end." If there be gods who read the future, they must have smiled at Miss Delano's prediction.

At the age of forty-seven, Miss Delano was president of the board of directors of the *American Journal of Nursing*, president of the American Nurses Association, superintendent of the Army Nurse Corps, and chairman of the National Committee on American Red Cross Nursing Service. It was as organizer and first director of the American Red Cross Nursing Service that Miss Delano became one of the most important figures in the history of modern nursing. When America entered the World War, it was to Miss Delano that the nation turned for twenty thousand trained nurses, and Miss Delano and her nurses were ready. A memento of those days was preserved by a youthful Red Cross writer, Sarah Elizabeth Pickett:



Led by Miss Delano . . . column after column of nurses, some clad in white with their scarlet-lined capes flung back, others marching row upon row in the smart blue uniforms of the Army and Navy, swung down Fifth Avenue in that first historic parade of October 9, 1917, the most spectacular pageantry of women mobilized for war that New York City had ever witnessed.

The battle is won, but the captain dies. After the armistice and the influenza, the American nurses in France welcomed their leader. She came in the winter, and died in the spring. Her father, an obscure private in the Civil War, lay in unmarked earth; the infant he left behind had grown into the foremost woman of the World War, and two nations watched the grave of Miss Delano placed amid the fallen soldiers of America, flanked by the peaceful orchards and slow-moving windmills of Brittany. In the fall of the following year, a United States transport brought the body from Savenay to its final resting place in the shrine of Arlington. Outside the headquarters of the Red Cross in Washington stands the imposing memorial (by the Canadian physician-sculptor, Robert Tait McKenzie) to Miss Delano and the 296 nurses who gave their lives in the war, bearing the inscription—and never were the words of the Psalmist more appropriate: "Thou shalt not be afraid for the terror by night; nor for the arrow that flieth by day; nor for the pestilence that walketh in darkness; nor for the destruction that wasteth at noonday."

A distinguished educator wrote Miss Delano's epitaph:

The memory of that commanding presence—the womanly face crowned with snow-white hair, the eyes radiant with energy and hope—will remain with all her friends and associates. Equally vivid will be her record upon the page of history as protagonist in the struggle which created and maintained the standards of American nursing. Her chief memorial is the administration from her room in the American Red Cross at Washington of the greatest army of relief ever mobilized.

Twenty years after her passing, there occurred the foulest assault on the human race in all the annals of time. It was an old German custom. When the Call came, the nurses of America again marched to war in the spirit of Jane Arminda Delano.

ANNE PENLAND. In the midst of argumentation whether nurses should be permitted to produce anesthesia, or whether only physicians are

qualified to bring about the twilight zone between life and death, Anne Penland was the efficient anesthetist at the Presbyterian Hospital of New York. In the first World War, when the Presbyterian Unit moved up to the casualty clearing stations on the British Front, the officer in charge asked the American surgeon, "But where is your anesthetist?" When Anne Penland was pointed out, the officer protested that she could not handle the situation, as many of the patients were big fellows who struggled before going under. The American surgeon grinned and said, "Wait and see." The officer continued to raise objections, but evidently the American surgeon (William Darrach) was not in a talkative mood that day, for all he did was to grin and say, "Wait and see."

It happened that on a table lay a big Britisher who, not content with fighting the enemy, was now fighting the ether. He did not relish the idea of losing consciousness, and his broad shoulders heaved ominously. At the proper moment, Anne Penland murmured: "There, dear, it won't hurt you a bit—there—there." Tommy's eyes opened in surprise—that feminine voice, the low tones, the Southern touch—it was something new in his young life. He was hypnotized before he was anesthetized. Soothed, comfortable, confident, he smiled sheepishly, and went under like a lamb. That is how little Anne Penland became the first official nurse-anesthetist on the British Front. From that time on, the British began to train hundreds of their own nurses as anesthetists.

ELLEN NEWBOLD LA MOTTE of Louisville, Kentucky, a graduate of the training school of Johns Hopkins Hospital (1902), joined the Instructive Visiting Nurse Association of Baltimore, which was the first organization in public health nursing to employ a special nurse for tuberculosis (1904); when the Health Department of Baltimore established a Bureau of Nursing (1909), Miss La Motte was appointed director, and with her staff of fourteen nurses took over approximately 1,600 tuberculosis cases from the Instructive Visiting Nurse Association. Being in France (1913) prior to the World War, she remained to serve as nurse in a French field hospital in Belgium; her travels in the Far East (1916-17), through Japan, China, French Indo-China, Siam, and the Straits Settlements, revealed nations enslaved by opium. She devoted many years of her life to combating this international menace. A contributor to such leading magazines as the *Atlantic*, *Century*, *Harper's*,



*Nation*, Miss La Motte was one of the most gifted of America's nurse-authors; her books include *The Tuberculosis Nurse* (1914), *The Backwash of War* (1916), *Peking Dust* (1919), *The Opium Monopoly* (1920), *The Ethics of Opium* (1924).

MARY BEARD of Dover, New Hampshire, a graduate of New York Hospital School of Nursing (1903), began her career as visiting nurse in Waterbury, Connecticut (1904), was director of the Instructive District Nursing Association, Boston (1912), and after serving as president of the National Organization for Public Health Nursing, and associate director of the International Health Division of the Rockefeller Foundation, received numerous marks of esteem, including the honorary degree of Doctor of Humanities (University of N. H., 1934), and culminating in her appointment as director of nursing service, American Red Cross, Washington (1938). Miss Beard contributed to Harper's Public Health Series the significant volume on *The Nurse in Public Health* (New York, 1929), based on field work. She was a vivid reporter, whether describing that strange hospital, without nurses, in an ancient thick-walled abbey where great loaves of bread in wicker baskets and bottles of wine are pushed through an opening for the patients, beneath whose uncleaned beds lank cats skulk for food; or the method devised in Denmark for maternal care by midwives, as a nursing function; or a day with Nurse Emma, a remarkable Negro herald of health in the Southern mountains.

An example, characteristic of her style, is this vignette of the nurses of Bordeaux:

The Florence Nightingale School of Bordeaux is in the outskirts of the city, in a lovely French garden where nightingales sing at sunset. Visited on the occasion of the opening of the American Nurses Memorial Building, which was dedicated to their sister nurses of France who died in the World War, it seemed to embody the spirit of its noble and devoted founder, Dr. Anna Hamilton. Such vitality, gaiety, and charm as the young French students showed that day would be hard to match. They danced with the most delightful effects of light and color, they sang in the darkening garden, they gave a little play indoors. Surely France has a great treasury of youth and vigor and idealism to draw upon for the nurses of the future.

MARY BRECKINRIDGE of Memphis, Tennessee, studied in Switzerland and Connecticut, received her technical education in St. Luke's Hospital

Training School, New York (1910), and British Hospital for Mothers and Babies, Woolwich, London (1925), becoming both a registered nurse and a certified midwife. In the interval she had made her mark by public health activities in devastated France (1919-23), and was now ready for her main work, the establishment in the Kentucky mountains of the first rural midwifery service in America: Frontier Nursing Service (1925). It may seem incredible that in industrialized America there were a thousand square miles as lonely as those hills, but it is even odder that in enlightened America more women have died in childbirth than men in all the wars of the nation. To Mary Breckinridge's nurses, mounted on horseback, such tasks as fording swollen rivers at dawn and riding trails at night during rain or snow, were part of the daily routine.

Health workers in regions which had known only the folklore of the "granny women," the members of the Frontier Nursing Service brought the resources of science to the remotest cabins in the hills. The most taciturn of the mountaineers, the most surly of the moonshiners, became eloquent at the mention of the Frontier Nursing Service. Daughter of a family distinguished in American history, Mrs. Breckinridge retained her maiden name, though she was married twice: the first marriage was dissolved by death, and the second by unhappiness; her only children, Breckie and Polly, died in infancy. Wounded by fate, yet unembittered, Mary Breckinridge and her nurses, confronted by primitive conditions in a modern world, lowered, to a remarkable extent, the infant death rate and reduced the maternal mortality in the mountains which they blessed by their service.

LILLIAN D. WALD. At the first commencement (1769) of the medical department of King's College—later Columbia University—only two diplomas were awarded, yet the occasion was important because of the presence of Samuel Bard, professor of physic. According to the chronicle, after addressing the two graduates, Samuel Kissam and Robert Tucker, on the high duties of their profession, Doctor Bard of Hyde Park eloquently urged on the community (a notable assemblage, including the governor of the colony, was there) the crying need for a general hospital, not only for the care and relief of the sick, but also as affording the best and only means of instructing students properly in the practice



of medicine. Organized in Colonial days (1770), chartered by George III (1771), occupied by British and Hessian troops (1776), opened for the treatment of patients (1791), the New York Hospital has witnessed the development of the city whose name it bears.

In the days when the New York Hospital fronted a spacious lawn surrounded by stately elms, one of its surgeons, Valentine Seaman (1770-1817), inaugurated a course of lectures and practical instruction in the nursing care of maternity cases, partially preserved in his duodecimo: *The midwives monitor and mothers mirror, being three concluding lectures of a course of instruction on midwifery; containing directions for pregnant women; rules for the management of natural births, and for early discovering when the aid of a physician is necessary; and cautions for nurses, respecting both the mother and child. To which is prefixed a syllabus of lectures on that subject* (New York, 1800). Maternity nursing may be a bridge to general nursing, but many years passed before the establishment of the New York Hospital Training School for Nurses (1877).

The first of its alumnae to become a nursing leader was the sensitive-faced Irene Sutcliffe, for several years the director of the school. In the summer of 1889 she found among the probationers a girl of twenty-two, undisciplined, inexperienced, but animated. The pupil lived at high pressure, and her dash and intensity must have made Miss Sutcliffe smile in secret. With thermometers, watches, large safety-pins and other instruments attached to her uniform and a white cap on her raven hair, she was a hurricane in the hospital. Born in Cincinnati and reared in Rochester, she was of Polish-German-Jewish stock, and came from a family which had been swept to these shores after the failure of the revolution of 1848. Her name was Lillian D. Wald (1867-1940), the initial standing only for itself.

Miss Wald graduated (1891) from the New York Hospital without any clear idea of what she intended to do. A chance visit gave purpose to her life: "A sick woman in a squalid rear tenement, so wretched and so pitiful that, in all the years since, I have not seen anything more appealing, determined me, within half an hour, to live on the East Side." Persuading a classmate, Mary Brewster, to join her, the two nurses rented the top floor of a tenement house; fortified with Board of Health badges, using their own lair as headquarters, they explored

the other tenements of the neighborhood and carried on such nursing and social work as fell their way. At the age of twenty-six, Miss Wald founded the Nurses' Settlement (1893), the first settlement for nurses. As activities multiplied, the house at 265 Henry Street was acquired, and became one of the most famous addresses in the world. Miss Wald saw the staff of two nurses develop into three hundred. More than any other individual, she transformed the stereotyped visiting nursing of her day into the community movements which widened the horizons of modern nursing.

After founding the Henry Street Settlement, Miss Wald embarked on her adventures in public health: she coined the potent phrase, "public health nursing" (1893); supplied sputum cups and disinfectants to the pioneer tuberculosis nurses (1893); turned adjoining backyards into a neighborhood playground—the Bunker Hill of Playgrounds (1895); investigated (1897-1909) unemployment, cases of dispossessed tenants; the midwives of New York; children out of school because of physical defects (to show the need of proper feeding and school lunches); one thousand pupils who had left school and obtained working papers at the age of fourteen; labor and construction camps throughout the state; children's street games; conditions surrounding working girls in department stores; factories and canneries; inaugurated public school nursing in America (1902); served on the Mayor's Pushcart Commission (1905) and on the State Immigration Commission (1908); initiated visiting nursing to industrial policy-holders (Metropolitan Life Insurance Company, 1909); and in her crowning year (1912), suggested the Federal Children's Bureau, established Rural Nursing Service of the American Red Cross, and became the first president of the National Organization for Public Health Nursing.

Miss Wald was a woman of action, and, despite distinguished literary neighbors, her talents did not lie at the end of a pen. Yet in the crowded years of her life she managed to produce two interesting books which are indispensable in the study of welfare movements: *The House on Henry Street* (New York, 1915) and *Windows on Henry Street* (Boston, 1934). One of the cruelest sentences Miss Wald was ever compelled to write occurs in the first book (p. 301): "An educated Chinese merchant who once called at the settlement apologized for the eagerness with which he accepted an offer to show him over the house, explain-



ing that although he had been thirty years in this country ours was the first American home he had been invited to enter."

In the second book, Miss Wald, who knew so much about givers and their gifts, calls attention to abundant but useless bequests, like the utterly absurd ones in the will of Ella Wendel:

This woman of almost incredibly narrow experience left enormous sums of money to outdated and remote needs. . . . Within a year a round sum was stated in the papers to have been given for a horse trough beside a Long Island road that is now a crowded motor highway. And the Samaritan Female Society provided a century ago a fund to be administered by the Andover Theological Seminary for the purchase of red flannels for the bodily comfort of theological students. Andover Seminary is no longer at Andover, and taste and comfort now prescribe other underwear. But it has taken an order of the court to make the fund available for the medical care and nursing of indigent students.

Miss Wald concludes this chapter with the dicta:

Times change, needs modify, standards alter. Attitudes of privileged men and women move toward a conception of new opportunities for the underprivileged. There is a science of giving, and a science of receiving. And the good impulse to give is perhaps more general in the United States than in any country in the world. Generosity is an American creed.

In the half-century that elapsed from Miss Wald's student days at the nursing school of the New York Hospital until she passed away in her Westport (Conn.) home, House-on-the-Pond, she activated social forces and enlarged the vistas of human welfare. She who spent so much of her time among the unfit and the underprivileged, the retarded and the disinherited, knew also the great ones of the earth. The guestbook of the house on Henry Street contained as remarkable a galaxy of international celebrities—authors, poets, dancers, artists, sculptors, actors, singers, millionaires, statesmen, reigning politicians, leaders of forlorn causes, revolutionists, archaeologists and anthropologists, physicians and nurses, representatives of the nations of the earth—as could possibly be found between book covers, and strange bed-fellows frequently jostled each other on the same page. The windows on Henry Street, as Ernest Poole used to say, look all over the world.

At the memorial services, the friends of Miss Wald, and her East Side neighbors, overflowed the Settlement Playhouse, and an immense gathering of people stood in the street. New York's leading rabbi spoke,

and closed by reading the most famous psalm of David. The mayor of the city, walking alone, led the long procession that followed at a distance. All knew that the nation had lost a unique citizen. Years ago she had stirred the melting-pot on her adopted block, and it became a community undertaking. In the amalgamation of the multitudes that came to these shores, in the eternal warfare against prejudice, she was a steadfast guide. Amid the darkness of ignorance and poverty, she pointed the path to the light. An American who devoted her life to those of foreign birth, this descendant of immigrants walked the ways of democracy. Her work was an international rainbow of friendship across humanity's sky. In the history of public health nursing in America, the name of Miss Wald is the foremost. Presidents, governors, senators, have paid her appropriate tribute. The credo of the Visiting Nurse Service of the Henry Street Settlement is Lillian D. Wald's finest epitaph: Response to every call for help, without regard to race or creed or color.

MARY ADELAIDE NUTTING. When Isabel Adams Hampton left the Johns Hopkins Hospital to go on her honeymoon with Hunter Robb, it did not seem possible that she could be replaced: as well talk of replacing a vanished statue by Phidias. Yet a successor as notable as her predecessor was close at hand, an alumna of the first graduating class of Hopkins, Mary Adelaide Nutting of the province of Quebec. Thus Canada, which gave the Hopkins nurses their first superintendent likewise gave them their second. During her Baltimore years, Miss Nutting translated the dreams of Miss Hampton into reality: the three-year course and the eight-hour day. Miss Nutting initiated and developed the preliminary course at Hopkins, tuition fees, and scholarships. She organized the Maryland State Nurses Association (1903), served as its first president, and guided the nurses to state registration (668 nurses in Maryland registered under the waiver which expired June 1, 1906). So a lady from the North with features of elfin delicacy lived in the South, and became one of the foremost of nursing educators.

The great adventure of Miss Nutting's life occurred in New York, and again she followed Miss Hampton. It was Miss Hampton's conviction that the hospital schools of the day were not equipped to teach the rapidly developing trends and the new outlooks in preventive medi-



cine and public health, and it was equally her belief that those who teach nurses should themselves be trained to teach. In Teachers College, she found the institution; in its liberal dean, Russell, she found the experimenter; and, in Miss Nutting, she found the educator to undertake the first course in the training of graduate nurses on a university basis. When Miss Nutting sat in the new chair of nursing (1907) in Teachers College, Columbia University, she was the first nurse in the world to become a professor in a metropolitan university.

The experiment was so far-reaching in scope and drew so many nurses within its fold, that it outgrew its resources and could not continue without funds. In her dilemma, Miss Nutting appealed to Miss Wald, who made the training of public health nurses possible by offering Henry Street as field work, and by talking Helen Hartley Jenkins into signing a big check. When Mrs. Jenkins realized what had been accomplished with her money, she increased the endowment to \$200,000, and contributed her personal interest to the movement. The names of Isabel Adams Hampton, James Earl Russell, Mary Adelaide Nutting, Lillian D. Wald, and Helen Hartley Jenkins, are thus linked as the five founders of the division of nursing education of Teachers College, Columbia University. Thousands have since passed from that ivy-covered building on Morningside Heights to become instructors of nurses, superintendents of training schools, heads of hospitals, and administrators of public health.

During her Baltimore period, Miss Nutting began collecting material on the history of nursing. Because of her personality and her position as principal of the nursing school of Johns Hopkins Hospital, she was enabled to enlist the cooperation of friends, physicians, pupils, and patients. The collection thus built up, item by item, was neither extensive nor expensive, but every item was useful. Not only was it the most important historical collection to be found in any nursing school, but several of the books and pamphlets, though of nineteenth-century vintage, have now become as rare as incunabula. It was a beautiful legacy which Miss Nutting left to Baltimore. That collection was the basis of the first two volumes of the *History of Nursing* (New York, 1907), written by the famous team of Nutting and Dock. (Miss Dock did most of the writing.) In New York, Miss Nutting was able to col-

lect on a more comprehensive scale, aided by a fund, by gifts from the History of Nursing Society and the Nurses Club of Teachers College, and by valuable contributions from the eminent mathematician and historian of science, David Eugene Smith. At Teachers College, Columbia University, those who went to the Fifth Floor Library in Russell Hall to consult the Nutting Historical Nursing Collection were in the midst of the largest and most important collection of its kind.

Miss Nutting was thus the founder of two historical collections, but she did not lose herself in the past. No one was more alert to the implications of the economic aspects of nursing education. In the year following her retirement from Teachers College, she published *A Sound Economic Basis for Schools of Nursing and Other Addresses* (New York, 1926). After twenty years it was still in stock in its first printing, for nurses are textbook buyers, and not readers of books which discuss their economic, educational, and social problems. Miss Nutting's volume is nevertheless a precious heritage for the nursing profession, worthy of study by every teacher of nursing. The address, "Apprenticeship to Duty" (pp. 350-64), originally delivered to the students of the Vassar Training Camp (1918) should be familiar to every probationer throughout our country.

It was Miss Nutting who suggested the writing of *A Short History of Nursing* by Lavinia Lloyd Dock and Isabel Maitland Stewart. Although Miss Nutting's name does not appear on the title-page, she is present throughout the book, and each of the four editions thus far published (1920-38) concludes with a quotation from her "Apprenticeship to Duty," which may stand as the credo of Mary Adelaide Nutting:

The hospital of the past was the outcome of humane and ennobling ideals of service to one's fellows, and in spite of all the vicissitudes of history which have made it now the engine of the Church, now the plaything of politics, or the path to fame of the ambitious, or have even abased it to clear commercial uses, to me it still stands in all its early beauty as the Hôtel-Dieu, the House of God. We may have great and imposing buildings, the last word in hygienic and sanitary appliances, dazzling operation rooms and laboratories, but that stricken human being lying there has many needs that none of these can satisfy. He must lean also upon the soul and spirit of the place to sustain and strengthen him. Such a soul and spirit many generations of workers—nurses, doctors, and others—have constantly striven to keep alive in our hospitals.



LAVINIA LLOYD DOCK. It rained too much in the Conemaugh Valley, and when the dam broke (May 31, 1889), the flourishing community of Johnstown was erased within an hour by moving walls of water. Homes floated in the flood all night like toy boats in a magic storm; people clung to roofs and grasped at tree tops; thousands of men, women, children, animals, were drowned in a river gone mad. Lavinia Lloyd Dock of Harrisburg, Pennsylvania, then serving as night superintendent of Bellevue Hospital, asked immediate release from duty, and was rushed to the scene ("pushed through from Harrisburg by officials of the Pennsylvania Railroad"). It was believed she would be the first nurse in the vanished city, but Miss Dock found a little old lady had been quicker. The little old lady was established in a big tent, distributing clothing to the survivors, serving nourishing meals, and passing around tons of boxes of necessities. How she and her supplies got through the flood, nobody knew.

The doomed city was under martial law, and the Army hoped the little old lady would not be in their way. They needed lumber to erect quarters to entertain the governor of the state, who would soon arrive on a tour of inspection. Carloads of lumber came from Illinois and Iowa, but all of it was addressed to the little old lady in black silk. So the Army borrowed the good timber from her, and the commanding general paid his respects to Clara Barton. He learned there was a new organization, American Red Cross, and Clara Barton was its president, general manager, and chief worker. Incredible as it seems, Clara Barton was already issuing engraved invitations for Five O'clock Tea in the new Red Cross House on Locust Street, Johnstown: certain guests were quietly taken aside, and told to remain for dinner; beside the plate of each homeless head of a family lay the key to an apartment, with a card instructing the family to take possession at once, and remain as long as desired. Miss Dock was a brilliant alumna of Bellevue Hospital, but the two days she spent under Miss Barton constituted the most valuable of postgraduate courses. Miss Dock left Miss Barton and went to the hillside tents to nurse the diphtheria patients. Miss Dock's nature was critical, and often caustic, but Clara Barton never ceased to be the object of her affection and esteem.

Miss Dock's first magazine article (*Trained Nurse and Hospital Review*, 1891), a blast at the reactionary editor of *The Hospital*, Sir

Henry Burdett, made her known to the nurses abroad: her name was remembered when two English ladies had a fight. This happened when the organizing committee of the International Council of Women met in London (June 1899), with the Marchioness of Aberdeen in the chair. Lady Aberdeen announced that she had received a deputation of matrons who expressed the wish that Mrs. Bedford Fenwick resign as head of the nursing section. Mrs. Fenwick, an expert parliamentarian, demanded the names of her accusers, and ascertaining that the matrons were opposed to government registration of nurses, she declared her refusal to resign on any such unconstitutional demand. Lady Aberdeen started to say, "I have consulted my brother Lord Tweedmouth . . ." She did not finish, for Mrs. Fenwick interjected, "I do not care for the opinion of Lord Tweedmouth or of any other lord." Thereupon Lady Aberdeen issued a threat, and Mrs. Fenwick dealt a counterstroke.

On the evening of that fateful day, Mrs. Fenwick entered her study at 20 Upper Wimpole Street, London, W.1. She lit the lamp, and when she turned it out, another day had dawned. In the travail of the night, the International Council of Nurses had been born. Isla Stewart, Margaret Breay and Margaret Huxley were the first who heard it in strict confidence: after their warm approval, the secret was given to the world (July 1, 1899). Miss Dock of the United States was the first secretary of the International Council of Nurses, and for many years (1899-1922) she held that unpaid and arduous position. Her correspondence, travels, preparation of reports, and activities at the congresses, gave her an international acquaintance with nurses. She could have written a history of modern nursing out of her own diary, and her recollections would have included nearly all the nursing leaders of her time. Miss Dock was the chief American influence in organizing the nurses of the world.

The *Schulordnung* (manuscript, 1750; published, 1770) of the Mennonite schoolmaster of Pennsylvania, Christopher Dock (1698-1771), is described as "the earliest treatise in America on schoolkeeping thus far discovered." The *Materia Medica for Nurses* (1890) of Lavinia Dock was the earliest textbook on the subject written by a nurse, for which the author began to prepare the manuscript one year after her graduation. Student nurses regard materia medica as one of the dullest subjects in the curriculum, and have even been heard to groan at the



mere mention of the name, but it is essential, and Miss Dock's pioneer treatise has been studied, underlined, and sighed over in hundreds of training schools; a statement from the publishers, some years ago, announced, "nearly one hundred fifty thousand copies have been sold." Evidently Miss Dock knew the needs of nurses when she compiled her first book.

Miss Dock was the leading man-hater of the nursing profession, but though this antagonism can be traced in her writings, it was never apparent in her nursing. As neatly summed up by Lillian Wald: "Reputed a man-hater, we knew her as a lover of mankind." With the human propensity to press on sore spots, Miss Dock gathered material on sexual problems in the British Museum ("despite the custodian's disapproval"). Her discoveries during the composition of her book, *Hygiene and Morality* (1910), did nothing to increase her tenderness for the male of the species. In studying English law, she learned that to abduct a girl under twenty-one for immoral purposes was a felony, provided the girl had a family and property; if she had no property, it was only a misdemeanor; and if she had neither family nor property, it was not an offense in the eyes of the law. It is easy to visualize Miss Dock, gritting her teeth in the grave sanctuary of the British Museum at the complacent men of property of God-fearing England who enacted such laws. The antique custodian was fortunate that she did not hurl a book at his head. In the storm-and-stress period of woman suffrage in America, when she was Little Doc Dock of streetcorner meetings, she had facts for her fiery denunciations of masculine tyranny.

The appearance of *A History of Nursing* (New York, Vols. I-II, 1907; III-IV, 1912) was a revelation of American research in nursing, and the work has had no rival in any language. Many classrooms have been familiar with its condensed version, *A Short History of Nursing* (1920). An imposing monument in nursing literature was erected by the publication of the massive volume, *History of American Red Cross Nursing* (1922). Miss Dock's share as co-author of these studies made her the foremost of nursing historians, a result achieved by the vitality of her style, knowledge of languages, command of facts, international outlook, an intelligence that would not compromise with stupidity, and a character that scorned to appease evil howsoever entrenched.

Goaded on by newspaper propaganda, many Americans were so afflicted by Russophobia, exhibiting at times the familiar manifestations of the witchcraft delusion, that there was truth in the dictum of the American director of the Russian Institute of Columbia University: "In the face of all the American misunderstandings of Russia, one might well say that never did so many know so little about so much." With social vision undimmed by age, Miss Dock loved the Soviet Union for ushering in a new era of human welfare and health, with racial justice, sexual equality, and economic security. Miss Dock's remarkable letter to Jessica Smith's journal, *Soviet Russia Today* (Nov. 1939, p. 41), demonstrated that a retired nurse may live in a village, and yet have a better understanding of current problems than the majority of her country's legislators.

Many wear modesty as a mask, and when publicity passes them by, they are resentful. Miss Dock was really modest: when her life's work was done she retired to a region so remote in her native Pennsylvania that it has no railroad station, and when she said she did not want to be written about, she meant it. Newsmen would find it difficult to make a living if all celebrities were like Miss Dock. One day a student nurse, in the hour on the History of Nursing, saw a portrait of Miss Dock flashed on the screen, and heard a recital of her achievements. At the close of the hour, she asked the teacher: "Where does Miss Dock live?" The teacher answered: "Fayetteville, Pennsylvania." The girl threw up her hands in surprise, and exclaimed: "I've known Miss Dock all my life, but I never knew who she was." The teacher asked: "Didn't you know she was a famous nurse?" The girl replied: "I knew she was a nurse, just a nurse, but I never knew she did any of those things you mentioned." Since Miss Dock, in her eighties, did not talk about herself, what did she talk about? Probably about the status of woman in the Soviet Union.

In summary: Lavinia Lloyd Dock was a graduate of Bellevue Hospital (1886), where she was night superintendent (1887); nurse in the yellow-fever epidemic at Jacksonville, Florida (1887) and in the Johnstown flood (1889); assistant superintendent of nurses, Johns Hopkins Hospital (1890), at the request of Miss Hampton; superintendent of nurses, Illinois Training School (1893); staff nurse, Henry Street Settlement (1896); first secretary, International Council of Nurses (1899);



a contributor to the first issue of the *American Journal of Nursing*, and editor of its Foreign department (1900); author of *Materia Medica for Nurses* (1890), *Short Papers on Nursing Subjects* (1900), *Hygiene and Morality* (1910); co-author of two of the most important contributions to the literature of nursing, *History of Nursing* (1907-12), in four volumes, and the official *History of American Red Cross Nursing* (1922), a work of over 1,500 pages; co-author of the standard *Short History of Nursing* (1920). In addition to all this, she was painter, pianist, and linguist; always, an independent thinker and colorful crusader. One of the most precious assets of modern nursing was Lavinia Lloyd Dock.

### ONE HUNDRED NURSES

The score of nurses whose careers have been briefly sketched above, include some of the most important names in American nursing, and others who were pioneers in time or place, or were identified with dramatic situations or incidents. The sketches could be extended to include a large number of worthy names. Out of hundreds, the following are representative:

(1) Eva Allerton, of *Mayflower* descent, and herself a pilgrim when she led the nurses of New York to the new land of state registration; (2) Anna Lowell Alline (Brooklyn Homeopathic Hospital, 1893), the first nurse inspector of training schools in New York State; (3) Lydia Elizabeth Anderson (N. Y. Hospital, 1897), an inspiring teacher in thirty-two schools of nursing in the metropolitan area, whose name is commemorated in her alma mater's Lydia E. Anderson Library; (4) Lucy Ayers, of the Connecticut Training School, leader of modern nursing in Rhode Island; (5) Bessie Baker, who wrote classic descriptions of the nurses with the A.E.F. in the first World War, and later organized and became first dean of the school of nursing of Duke University, Durham, North Carolina; (6) Grace Baxter, who went from Johns Hopkins Hospital to Italy to modernize the nursing in that ancient land; (7) Louise Kafka Belton, a Navy nurse who made a record by her public health work on the island of Haiti; (8) Effie Benedict, who directed, under the auspices of the New York Society for Ethical Culture, the first nonsectarian district nursing in America; (9) Elizabeth Seelye Bixler, alumna of Smith College and of Radcliffe, the first graduate of Yale

University School of Nursing to become its dean; (10) Helen Bridge, who established, at Warsaw (1921), the first modern school of nursing in Poland; (11) Marion Turner Brockway, the first probationer in the nursing school of Johns Hopkins Hospital, who became industrial nurse to thousands of employees of the Metropolitan Life Insurance Company; (12) Abbie Hunt Bryce, whose motherly features made her a natural Mother Bryce to thousands of girls, the Bellevue nurse who graduated the first nurses in Indiana; (13) Josephine Burton, who registered in Craven County, North Carolina, as the first registered nurse in America; (14) Sadie Heath Cabaniss, without a rival, the outstanding nurse of Virginia; (15) Ida Maud Cannon, chief of social service, Mass. General Hospital, and author of the standard volume on the subject, *Social Work in Hospitals*; (16) Alice Carr, whose warfare against malaria in Greece was an epic worthy to be sung by a modern Homer; (17) Genevieve Cooke, founder and first editor of the *Nurses Journal of the Pacific Coast*; (18) Nancy Cornelius, of the Oneida tribe, the first American Indian to receive a nurse's diploma; (19) Ella Phillips Crandall, whose achievements with the National Organization for Public Health Nursing, N. Y. Association for Improving the Condition of the Poor, and American Child Health Associations, placed her among the foremost of welfare workers; (20) Annie Damer, president of nursing associations, local and national, who established a social service department for the tuberculous patients who came to the dispensary of Bellevue Hospital; (21) Louise Darche, who sacrificed herself on the battlefield of nursing when she established a training school at the Charity Hospital on Blackwell's Island, against the opposition of a corrupt and powerful political machine; (22) Linna Denny, the first Red Cross nurse in Alabama, the first president of the Alabama State Nurses Association, and a member of the state board when its files fitted into a cracker-box carton; (23) Mary Brown Dewey, the first superintendent of the Illinois Training School for Nurses, in which position she reformed the nursing in the chaos of Cook County Hospital; (24) Katherine De Witt, author of the standard text on *Private Duty Nursing*; (25) Lucy Lincoln Drown, whose years as superintendent of her alma mater, Boston City Hospital, made her a national figure in nursing; (26) Bertha Erdmann, organizer and first president of the North Dakota State Nurses Association; (27) Alice Louise Florence Fitzgerald, whose



international career was an epitome of the romance of nursing; (28) Gertrude Fournier, superintendent of Hope Hospital, Fort Wayne, who organized the Indiana State Nurses Association; (29) Harriet Fulmer, a pioneer of public health nursing in Illinois, and first president of the Illinois State Nurses Association; (30) Janet Fulton, who started at Teheran the pioneer nursing school in Iran as soon as the newly emancipated Persian women took off their veils; (31) Nina Diadamia Gage (Roosevelt Hospital, N. Y.), educator of nurses in our Northern and Southern states, and dean of Hunan-Yale School of Nursing in Changsha, China; (32) Mary Elizabeth Gladwin, whose nurses in the horror of the Dayton flood, rubber-booted and with skirts kilted high, not only attended to the sick, but supervised everything from feeding the baby to digging trenches; (33) Annie Warburton Goodrich, the dean of such important institutions of nursing that she may be regarded as the dean of American nursing; (34) Hazel Avis Goff (Mass. General Hospital, 1917), head of the Bulgarian Red Cross School at Sofia, director of the Red Crescent School at Istanbul, Turkey, and adviser to the Health section of the League of Nations; (35) Elinor D. Gregg, director of nursing, U. S. Indian Service, who wrote the brightest page in the American treatment of the Indian, from Alaska and the Aleutian Islands down to the Everglades of Florida; (36) Regina Thoma Hardy, a founder of the Arizona State Nurses Association, who raised the educational and ethical standards of nursing in the Apache State, whether serving in a mining-camp hospital or presiding over committees and conventions; (37) Agnes Hartridge, who bore the brunt of the battle for the state registration of the nurses of Georgia; (38) Esther Voorhees Hassan, the first superintendent of the Navy Nurse Corps and designer of its insignia; (39) Helen Scott Hay, director of Nursing Service for the American Red Cross in Europe, from whose headquarters in Paris she guided the health activities of a continent; (40) Anna B. Heldman, visiting nurse and social worker among the poor of Pittsburgh, known to thousands as the Angel of the Hill District; (41) Mary Agnes Hickey, the first superintendent of nurses, U. S. Veterans Administration; (42) Jane Elizabeth Hitchcock, who labored for years to place public health nursing in the curriculum of training schools; (43) Jane Hodson, whose volume, *How to Become a Trained Nurse*, was once a landmark in the literature of the profession; (44) Sally Johnson, director of the Army

School of Nursing, Walter Reed Hospital in Washington, during the first World War, and for many years director of the School of Nursing, Mass. General Hospital; (45) Dita H. Kinney, the first nurse superintendent of the Army Nurse Corps; (46) Diana Clifford Kimber, reformer of nursing and author of a basic textbook; (47) Elsie Mildred Lawler, for thirty years the superintendent of nurses and principal of the school of nursing at Johns Hopkins Hospital; (48) Helen Holliday Lehmann, dean of the Baylor School of Nursing at Dallas, leader of nursing in Texas; (49) Julia Lide, the Alabama nurse who served in the Spanish-American War, and in the first World War was awarded the Croix de guerre for bravery under fire at Château-Thierry; (50) Harriet Camp Lounsbery, the foremost nurse of West Virginia; (51) Clara Louise Maas, who in the dark age of yellow fever volunteered to be bitten by a mosquito, and thus laid down her young life on the altar of experiment; (52) Ola Hollopeter Madison, the first trained nurse in Dodge City, Kansas, whose career in the frontier town was an adventure; (53) Mary Mahoney, the first Negro woman to become a graduate nurse; (54) Stella Mathews, the Milwaukee nurse who fought typhus, and developed a child health program and schools of nursing in Poland; (55) Mabel McCalmont (Homeopathic Hospital, Washington, D. C.), the Florence Nightingale of the Philippines; (56) Amanda Metzger, the first public health nurse to the Indians of New Mexico; (57) Elizabeth F. Miller, who steadfastly defied partisan pressure in the commonwealth of Pennsylvania, finally stating her credo as nursing service to the public, regardless of race, creed, or political persuasion; (58) Lucy Minnigerode, whose career as first superintendent of nurses, United States Public Health Service, was a saga of sanitation; (59) Elizabeth Gertrude Mitchell, notable for her work for child welfare in Montenegro and Roumania; (60) Jessie Murdoch, whose work at Jersey City Medical Center is memorialized in the twenty floors of Murdoch Hall; (61) Clara Dutton Noyes, one of the main builders of the nursing service of the American Red Cross, who established National Nursing Headquarters and founded schools of nursing overseas; (62) Sylveen Nye, the stormy petrel who was the first president of the New York State Nurses Association; (63) Adeline Orr, the first graduate nurse to practice in North Carolina, who gave such sympathy to the female convicts in Asheville that she was known as the Angel of Buncombe Prisoners,



and in later years devoted herself, with equal compassion, to the lepers at Carville, Louisiana; (64) Sophia F. Palmer, who began the *American Journal of Nursing* when all its equipment could be carried in a suitcase, and by her forceful pen made it the official voice of the nurses of America; (65) Marian Parsons, who organized and directed, in Prague, the first school of nursing of Czechoslovakia; (66) Garnet Isabel Pelton, the nurse who became the first hospital social worker; (67) Lilly Price, the first trained nurse in Richmond, Virginia; (68) Amy Elizabeth Pope, writer of textbooks, and reformer of nursing in Puerto Rico; (69) Louise M. Powell, who developed, at the University of Minnesota, the first university school of nursing; (70) Martha Elizabeth Pringle, the first nurse to be advanced to the grade of Chief Nurse, U. S. Navy; (71) Mary Eliza Reid (Cincinnati Deaconess Hospital, 1897), who opened the first hospital school of nursing in Charleston, West Virginia, was the author of a popular manual on bacteriology, and bequeathed to her profession the manuscript of *A History of Nursing in West Virginia*; (72) Estelle Massey Riddle, president of the National Association of Colored Graduate Nurses, the first Negro superintendent of nurses and director of the nursing school, Homer G. Phillips Hospital, St. Louis; (73) Ellen Agnes Kenny Ruby, the first district nurse of Providence, who lived to see an organization of seventy nurses follow in her footsteps; (74) Sophia Rutley, an early trained nurse in Michigan, Minnesota, Colorado, and the first president of the California State Nurses Association; (75) Mary E. Schumacher, first president of the Vermont League of Nursing Education, and of the Vermont State Nurses Association; (76) Olive Sewell, whose seven years in Serbia with the Child Welfare Commission sowed the seeds of public health in that Balkan land; (77) Esther Lucas Shields, the Blockley nurse who devoted forty years of her life to Korea; (78) Margaret Elliot Francis Sirch, director of the nursing school at her alma mater, Buffalo General Hospital, the first editor of *The Trained Nurse*; (79) Mabel Leilani Smyth (Springfield Hospital, Mass.), the Florence Nightingale of Hawaii; (80) Elizabeth Sterling Soule, professor of nursing education, University of Washington (Seattle) where she introduced field work and developed the public health nursing course; (81) Ada Mayo Stewart, who worked for the Vermont Marble Company at Proctor as the first industrial nurse in the United States; (82) Julia Catherine Stimson,

for over a generation one of the most prominent names in American nursing; (83) Lillian Bell Stuff, the Nebraska nurse, heroine of the Omaha cyclone; (84) Irene Sutcliffe, the teacher of the teachers who became the leaders of American nursing; (85) Cora Sydney, who founded the school of nursing of the Emmanuel Hospital at Capiz on the Isle of Panay in the Philippines; (86) Effie Jane Taylor, dean of Yale University School of Nursing, and president of International Council of Nurses; (87) Rebecca Thelin (Johns Hopkins Hospital, 1903), who became in the year of her graduation the first tuberculosis nurse in America; (88) Adah B. Thoms, an organizer of the National Association for Colored Graduate Nurses, and the historian of Negro nursing; (89) Susan Tracy, the first nurse to teach occupational therapy, whose *Invalid Occupation* was the pioneer volume on the subject; (90) Nancy Vance, the nurse who, upon learning she had carcinoma, turned her life savings into a fund for cancer patients, which developed into the Nancy Vance Fund of the University of Virginia; (91) Jane Van Zant, who inaugurated modern nursing in Syria when she established a school in the American hospital of Beirut; (92) Lucy Walker (St. Bartholomew's Hospital, London), superintendent of nurses at Pennsylvania Hospital, where she was a pioneer in increasing the nursing course to three years; (93) Isabel Jean Walton, whose name will always be associated with St. John's Floating Hospital; (94) Emma Louise Warr, the girl from Brooklyn who built the St. Louis Training School for Nurses, the earliest training school in Missouri, and was known as the St. Louis Florence Nightingale; (95) Yssabella Gertrude Waters, who instituted valuable annual surveys of American organizations in public health; (96) Emily Weder (Jewish Hospital, Philadelphia, 1916), who served in Siberia and the Philippines, the little Major of the Army Nurse Corps who had charge of the largest military operating rooms in America, first at the Letterman Hospital in San Francisco, and later in the Walter Reed Hospital in Washington; (97) Roberta Mayhew West, first graduate of the nursing school of America's oldest hospital (Old Blockley), and in her later years the most prominent nurse in Pennsylvania; (98) Emilie Willms, superintendent of the American Women's Hospital and Training School for Nurses in Kokinia, Greece, a trail-blazer of modern nursing under primitive conditions in a refugee city; (99) Maud Headline Mellish Wilson, the nurse who for a quarter-



century edited the medical thought of the Mayo Clinic and the Mayo Foundation; (100) Helen Young, whose thirty years of nurture helped to bring the Columbia-Presbyterian Medical Center of New York to its present-day eminence.

CONCLUSIONS. Such lists, as already indicated, could be extended until they made up a thick-volumed "Dictionary of American Nurses." It is realized, however, that the greatness of the nursing profession lies in the mass of its members. The nurse who isolates herself in a farm house with a contagious case, the nurse in a rural community who explains that the bedpan of a typhoid fever patient must not be washed at the family pump, the nurse who convinces a well-meaning hillbilly that the old horseblanket borrowed from the stable must not be employed to cover his pregnant wife—these nurses do not read their names in the newspapers, and perhaps not in their professional journals or even in their local bulletins, but they are rendering life-saving nursing service.

Whether with pompous doctors and querulous patients, or with appreciative doctors and grateful patients, it is the daily routine of nursing, it is the acceptance of duty as it comes, it is the facing of any task no matter how difficult or howsoever repellent, it is nursing without glamor, that has built up the nursing profession of America. There are nurses who are unworthy to carry the lamp, who are unfit to sign the letters R.N. to which they are legally entitled. Yet the wonder is that in a profession which has grown so vast, whose members are gathered from every walk of life, the number of the undeserving should be so small, while the majority live up to the highest traditions of woman's noblest profession.

## XIV

### Edith Cavell



On the evening of September 23, 1740, seven men sat in the bar parlor of Feathers Tavern, Cheapside, and decided to establish the London Hospital with the hundred guineas they had collected. (Generations later, when the institution had grown venerable enough to acquire a secretary-historian, he boasted that the sum of one hundred guineas would run the hospital from breakfast to dinnertime, but he admitted the importance of that initial gathering at the tavern.) The leader of the group was John Harrison, Surgeon, the real founder of the London Hospital. A blunt, straightforward man, John Harrison was remarkable for his perception of the function of a hospital. He maintained it was the duty of a hospital to ask three questions of its patients: Are you poor? Are you ill? Can we help you? He likewise maintained it was not the duty of a hospital to ask a fourth question: Are you moral? Sorrow was sacred to John Harrison, Surgeon.

First situated in a house in Featherstone Street, the hospital soon moved to Prescott Street, Goodman's Field, and eventually to Whitechapel Road in the heart of the great slum of the city. Here it was visited by John Howard (Sept. 15, 1788), who found the passages dark; no cisterns for water and the vaults offensive; he disapproved of the diet and did not like to see medical and chirurgical patients together. The inexorable reporter wrote down in his notebook: "In a dirty room in the cellar there is a cold and hot bath, which seem to be seldom used." He admired the spaciousness of the building, and praised the generosity of admitting patients without any fee or reward to nurses. He suggested various reforms which the hospital promised to adopt. That the London Hospital felt it had reached the ultimate in sanitation, is obvious from the fact that in the year in which the cesspool of the



hospital overflowed into a neighboring garden, the following resolution was passed: "The Committee congratulate the Court with joy that the Infirmary is now established on such a basis, and governed by such laws and regulations, as not to admit of any innovations."

The London Hospital was the recipient of bequests and donations, one of its most interesting gifts being the superb clock by the workmen of John Ellicot, the celebrated clockmaker to George III. It was fixed over the main entrance to the hospital, and was lighted by gas which had recently come into fashion. The Ellicot clock set the time for the neighborhood, and as it ticked out the hours and the years and the generations, it witnessed the modernization of medicine and the revolution of nursing. John Ellicot, as a man of science, was a friend of Benjamin Franklin, whom he brought to the hospital when the American was visiting England. Franklin, naturally, became interested in the London Hospital, and one of his letters to Ellicot was framed for the committee room. From Philadelphia, Franklin wrote to the chairman of the London Hospital: "The Monday scarce comes round, but I think of you and am present with you in spirit. Shall take it most kindly if, when you are not crowded, you would order a chair for me and only caution one another not to tread on my toes." The London Hospital was the scene of countless tragedies, but there was something about its spirit which caused it to be loved by the East End and by illustrious visitors.

The early nurses of the London Hospital were usually the lowest type of abandoned old women, for nursing was the most disgraceful of occupations. As nurses at the London Hospital were obliged to make the beds of the servants, they were the servants of servants. Nurses were engaged without a character, since no one who could obtain a reference would think of becoming a nurse or watch. The hospital's first matron practically starved the patients, ran up unpaid accounts with local tradesmen, and then disappeared. One nurse was discharged because she requested liquor when she was already too much under the influence of liquor. The committee inserted an advertisement for "a sober, grave person who is capable of acting as a nurse," but the applicant who claimed these virtues was dismissed as soon as it was ascertained she was neither sober nor grave. As time passed and the nurses did not improve, the committee repaired to the Angel and Crown Tavern,

hoping to find the answer in their ale: it did not occur to the committee that they paid the nurses less than a lame beggar could earn in the streets, and that they worked the nurses from dawn until late at night. There were no qualifications for the nurses of England, and only two disqualifications: she must not be a chronic drunkard, and she must not be Irish. Such was nursing in the age that has been called The Enlightenment.

It would be as inaccurate as it would be ungracious, if the impression were conveyed that the nurses were invariably worthless. Among them were decayed gentlewomen who took up nursing because they wanted bread, or because they were women whose main fault was their poverty. What is known is that, despite the general degradation of their occupation, the disgusting setting in which they worked, the contempt in which they were held, the abuse to which they were subjected, some of the women were sincerely interested in the welfare of the paupers in their care, nursing them with patience, fidelity, and tenderness. The minutes of the London Hospital contain tributes to these exceptions; sometimes their names were not mentioned, as if the names of such submerged persons did not matter. On other occasions the names were given, and later transcribed by the historian of the London Hospital as examples of born nurses: Annie Broadbent, Susan Jewell, Sarah Lowe, Ann Maddy, Catherine Willis. These untrained women deserve to be held in honored remembrance, for they were apostles of nursing at a time when nursing was without reward or recognition.

The years passed, and the London Hospital became part of modern times. The little tract, *The Bitter Cry of Outcast London* (1883), revealed the harshness of poverty in the metropolis which proudly called itself "the greatest city in the world." The London Hospital saw, among countless similar ones, these cases: One evening, a little girl waited in the out-patient department to have an aching tooth removed. After the operation, a nurse who noticed her famished appearance, gave her a cup of tea with a slice of bread and butter. The following evening the child came again, and when asked what she wanted, hopefully replied, "Please, can I have another tooth pulled?" A little boy, admitted to the wards for malnutrition, receiving a cup of warm milk from the nurse, inquired: "How far down may I drink, please, Sister?"



The little fellow did not mean to do it, but his question indicted centuries of Christian civilization.

Nothing could be done about the poverty, but a new era in nursing at the London Hospital dawned with the coming (1880) of Eva Lückes (1854-1919) as matron. Only twenty-six at the time, it was said of her that she shattered the old-fashioned notion that a matron, like a bishop, should be burdened with age and wearied with experience. She remained at her matron's desk for nearly forty years, and was a success from the beginning. Although St. Thomas's had a start of two decades, the training school which Miss Lückes founded at "The London" became the largest in the land. After a quarter-century of service, the occasion was marked by the opening of the luxurious Eva Lückes Nurses Home, and Miss Lückes presided as chief of a staff of 566 nurses. A master of organization, a smiling expert of administration, she was honored for her usefulness and esteemed for her integrity. She trained an army of nurses, and continued to be the matron of matrons to all of them.

One April day (1896), Miss Lückes interviewed an applicant whose two letters of recommendation were filled with the usual flattering adjectives. They formed a striking contrast as they sat there, facing each other for the first time. The matron was in her forty-second year, the candidate in her thirty-first. The matron was short but massive, a woman of ample proportions. The candidate was small and slender, and when she said she weighed 112 pounds, she was giving her maximum weight. The eyes of the matron twinkled as she talked, and little smiles constantly chased each other over her mouth. There were no answering smiles on the lips of the candidate; her eyes were clear and gray and intensely serious. Under the matron's adroit questioning, the candidate soon told her story:

She was born December 4, 1865, in the fragment of a village called Swardeston, in Norfolk County, but near by was Norwich. Her father was vicar of Swardeston; her mother was the daughter of her father's former housekeeper, yes, her parents were living. She was the eldest of the children; she had two sisters and a brother. Education? Chiefly at home, though there had been some outside instruction for brief periods. She was a teacher, and until she had been called back by her father's severe illness, she had served for five years as governess in

a wealthy family in Belgium. She spoke French fluently. Brussels was so different from an English town, but she loved Brussels. She wanted to be a nurse. Eva Lückes accepted her as a probationer, and asked her to sign the application-blank. The candidate wrote her name: Edith Cavell.

Eva Lückes asked many questions of Edith Cavell, but Edith Cavell did not ask any of Eva Lückes. Miss Cavell was not in a condition to know that the London Hospital, although the largest voluntary charity in the kingdom, with the largest training school, was no longer regarded as among the best by progressive nurses. At a time when other training schools gave a one-year course, Miss Lückes had established a two-year course, but at the period when other training schools were giving three-year courses to keep up with the march of nursing, Miss Lückes kept to her two-year standard: it was the old story of the pioneer of one generation becoming the reactionary of the next. Moreover, in the battle for the organization and registration of nurses, foremost in intrenched opposition were the editor of *The Hospital*, Sir Henry Burdett (a nuisance in nursing), and Eva Lückes, matron of the London Hospital. Among the most influential pamphlets in the path of nursing reform were Henry Bonham Carter's *Is a General Register for Nurses Desirable?* (1888), and Eva Lückes's *What will Trained Nurses gain by joining the British Nurses Association?* (1889). Of course, Miss Lückes's participation in the nursing politics of the day did not prevent her from giving an excellent course in the London Hospital, and she molded Edith Cavell into a competent nurse.

So Edith Cavell became a probationer at the London Hospital, entering the recently opened Tredegar House which served as the institution's training school. The propriety of the profession still worried some mothers; one of them inspected the skeleton in Tredegar House with the explanation, "As my daughter will have to see the skeleton, I had better do so first." The probationers practiced on the much-enduring dummy, the uncomplaining dummy, whose agonized countenance, according to Sarah Tooley, must have been an excellent preparation for encountering the faces of real patients later on. The pupils were permitted a specified number of minutes for the head, shoulders, arms, knees, and legs, and if they lingered overlong in their efforts to make their bandages works of art, they were awakened from dreamland by



a gentle voice, tinged with a sarcastic query, "How would a suffering patient feel under your leisurely movements?" The proverbial merri-ment of probationers between classes, and sometimes even in class, found no echo in Miss Cavell. A mature woman, and grave beyond her years, she was aloof from fun and frolic. No one, either then or later, knew her well. It is not surprising if some of those who worked in the hospital with Edith Cavell did not remember her in the years ahead.

After her graduation, Miss Cavell remained for a time in the London Hospital as staff nurse. Her first task outside her alma mater was at Maiden Head, Kent, where she went as chief nurse to fight a typhoid epidemic among the hop-pickers. In that same year (1901), she became night superintendent of St. Pancras Infirmary, Upper Holloway. Her next position (1903) was as assistant matron of Shoreditch Infirmary, Hoxton Street, under the matronship of Joan Inglis, who was also an alumna of the London Hospital. During her first decade of nursing (1896-1906), Miss Cavell worked in the vast slums where living standards were submerged by hopeless poverty, unmitigated and unrelieved. The empire on which the sun never sets, never attempted to solve the problem of having enough bread for its people at home. Miss Cavell did not question the strange distribution of wealth, she was too well mannered to irritate the capitalistic system: her function was to take care of the sick poor, and to teach student nurses to do the same. Fate, in the person of Antoine Depage, stretched out its hand for Edith Cavell.

Antoine Depage (1862-1925), a graduate of the University of Brussels (1890), continued his studies in Leipzig, Prague, and Vienna, and began his academic career as a demonstrator in pathological anatomy in his alma mater, where he eventually rose to the professorships of clinical surgery and surgical pathology. He distinguished himself by investigations in genitourinary surgery, and gained an international reputation by his military surgical activity and organization of ambulances. Co-author, with Rouffart and Mayer, of *La chirurgie des ptoses viscérales* (1904), he issued later, with Vandervelde and Cheval, *La construction des hôpitaux* (1909), both published in Brussels. Depage reached his position by hard work, for he came up from the bottom.

The thorn in his impatient flesh was the nursing service of his native land. The only nurses at his disposal were the black-robed nuns of Saint Augustine Convent. Depage trained them as surgical nurses, only

to see them called back to the convent by the Mother Superior Helene on the eve of operations. The mother superior tormented Depage by snatching away his best-trained nurses at the most crucial moments, and in this matter the implacable woman defied even the archbishop, saying that her Black Sisters belonged to the convent of Christ and not to the hospitals of blaspheming surgeons. Depage, of peasant stock, was a man whose temper boiled readily, and his fury drove his blood pressure to dangerous heights. Depage fought many battles with the mother superior, and lost them all, and yet his was the victory. Goaded onward by defeat, out of his agony he founded Belgium's first school of diplomaed nurses.

In a statistical study of hospital mortality, Depage learned the superiority of Nightingale nursing. Depage therefore needed an English matron as directress of the school, but one who was thoroughly familiar with the life and language of his people. Where, asked Depage, was such a rarity to be found? It seems there was a family in Brussels who heard of the inquiry and knew the answer: they remembered their efficient governess who had become a nurse, a woman of dignity who, no doubt, would make an ideal matron. Thus Edith Cavell received the letter which was to alter the course of her life, and to inaugurate trained nursing in Belgium. She who had first entered Brussels as the youthful governess to the four privileged children of a prominent family, returned seventeen years later to teach the women of Belgium how to take care of the nation's sick.

There was no question of Depage's technical competence, and he had valuable ideas for the advancement of Belgian medicine and nursing; he also had an exaggerated sense of his own importance; he refused to make any effort to control his volcanic moods; he was extremely fussy, and if nurses annoyed him, he saw no masculine reason why he should not relieve his outraged feelings in unrestrained profanity. Miss Cavell was a nurse, but, also, she was an English lady, and it is doubtful if she would have endured the doctor's tantrums, had it not been for the intercession of his wife. Conditions made Marie Depage the opposite of her excitable husband: she was the sweet diplomat who calmed the tempest and assuaged the storm. In the history of Belgian nursing the names of these women are linked so closely that they are frequently hyphenated: Marie Depage-Edith Cavell.



On the tenth anniversary of the International Council of Nurses, the nurses of the world held a wonderful meeting in London. As officially stated, never before had nurses of so many nations gathered together as assembled at Church House, Westminster, on that Monday morning (July 19, 1909). Mrs. Bedford Fenwick (Ethel Gordon Manson), founder and president, public health statesman in skirts, and avatar of nursing, sounded the watchword when she said:

The presence at our Council Meeting of distinguished matrons and nurses from so many parts of the world is evidence of the close kinship between the nurses of the nations. We nurses, unlike the members of many other professions, are happily untroubled by national considerations. Our work stands apart from every influence, excepting that which promotes the health, and therefore in a large measure the happiness, of the peoples of the world. Comrades, I wish you vital hours.

Among the 414 members were many of the most famous names in modern nursing. Members or messages came from Australia, Belgium, Canada, Cuba, Denmark, Finland, France, Germany (leader of nursing in Germany, Sister Agnes Karll was nearly smothered in roses, while the organ pealed forth the "Wacht am Rhein"), Great Britain and Ireland, Holland, India, Italy, Japan, New Zealand, Philippines, South Africa, Sweden, Switzerland, Syria, and the United States. The national anthems were stirringly played, and the delegates bloomed amid the flowers they received. The only sour note occurred when the Hon. Sydney Holland, chairman of the London Hospital, arose and expressed his opinion that the congress did not represent English nursing, since he held in his hand a manifesto signed by sixty-seven anti-registration matrons of English hospitals. (Florence Nightingale and Eva Lückes were largely responsible for this.) The announcement cast a deep gloom over the assembly until the recalcitrant matrons were forgotten in the fun and food and fellowship of a brilliant banquet at the Gaiety Restaurant—each inspiring the others to work together in the spirit of internationalism.

At this meeting, Edith Cavell read a paper on nursing in Belgium. She began by saying that nursing in Belgium, though still much behind that of England, Holland, and other countries, had made some progress in the last two or three years. She said there was an evident desire to supersede the present ignorant and blundering methods by enlightened

and up-to-date work. She said the hospitals in Belgium were staffed by nuns or by lay nurses, most of whom were peasants taken directly from the fields, without any training or instruction. She explained that where the nuns were in charge, much of the rough and unpleasant work was done by lay nurses who were really low-class servants. She mentioned the attempts at improvement being made in the Hôpital St. Jean, in the mental hospital of Fort Jaco at Uccle near Brussels, and in hospitals at Antwerp, Liège, Gand, Mons, and Anderlecht.

The most interesting aspect of Miss Cavell's paper was the portion in which, without mentioning her name, she referred to her own work:

The only school which exactly answers to the conditions of training in England is the Ecole Belge d'Infirmières Diplômées, generally known as the School of the Rue de la Culture. This school has been open since October 1, 1907, and has now thirteen pupils. It was founded by a committee of doctors and others anxious to improve nursing, to open a new career to Belgian girls of good education, and to train new aids in the cause of science. An English Matron was engaged to open it, and four pupils formed the first recruits. After two months' trial, the probationers sign a contract for five years. The first year is passed in a clinic attached to the school, where medical cases are received and lectures given; the second in a surgical clinic, where the lectures are continued; in the third we hope to give the pupils experience in infectious work or in the nursing of children. A great point is made of discipline and character, and the pupils have given proof of much devotion and loyalty.

Miss Cavell's brief report was not regarded as one of the outstanding papers of the convention. She had not come as the representative of the Belgian government, and she did not sit on the dais among the distinguished nurses. Her school was then small, and her work still in its infancy. Her paper was significant, however, because it was a "first"—the first which revealed the changing status of nursing in Belgium. The nurses who listened to Miss Cavell, learned what they could not find in print—under the leadership of an English matron there was a movement to modernize Belgian nursing. Everyone was familiar with Brussels lace, but the new nursing in Brussels was unknown. Belgium, where so many battles had been fought, on the threshold of the centenary of Waterloo was one of the best-known spots on the map, but its nursing problem was unexplored ground to the outside world. The contribution of Edith Cavell was definite: she established trained nursing in Belgium.

For seven years, Miss Cavell took raw Belgian and Dutch girls, turn-



ing them into trained nurses. She was busy day and night, and no one remembered her at rest. Visitors from her beloved alma mater, even if they came with messages from Eva Lückes, soon found that Edith Cavell simply had no time for recreation—a cup of tea was the limit of her social amenities. The story is told of a nurse from the London Hospital who spent two years in Brussels without getting any closer to the matron than brief telephone conversations. In 1914, it was necessary for her to take her annual vacation earlier than usual, for she was exhausted. She was passing the month of July with her mother at Norwich, where the medieval cathedral stands between the castle and the river. Tired as she was, she cut short her vacation when she read in the papers that the clouds of war were hovering over the Continent, and that Belgium, the old cockpit of Europe, might be invaded. She bade her widowed, eighty-year-old mother farewell, for if there was trouble in Brussels, it was her duty to be in her hospital.

An ultimatum, insolent and impossible, was rejected by Belgium: the small country which could not defend its borders against a giant neighbor, could keep its honor inviolate. Edith Cavell, looking out of the windows of her school on Rue de la Culture, saw countless men doing the goosestep. It was the triumphal entry of the foreign conqueror. Some of the soldiers were weary with marching, and the woman of compassion had pity for their pain, and wished to go out and help them. As the days went by, Miss Cavell attended sick Germans as faithfully as she cared for Belgian and English patients: in a nurse's credo there is no national discrimination. In the calculated effort to destroy the soul of a people, Germany employed every weapon in the armament of human crime. Belgium was vivisected in the laboratory of the German occupation. Lighthearted Brussels, which had been one of the gayest capitals in Europe, became the abode of fear. Yet such is the German mentality, that at the height of the terror, Baron von Bissing indignantly complained to an American correspondent: "The work of the Germans in Belgium is not appreciated at its full value by the Belgians, whose mind, and that is comprehensible, is enveloped in a cloud of patriotic sentiment."

Soldiers of the Allies, separated from their regiments, hiding in the woods, sheltered in the cottages of villagers, concealed in convents, were hunted like wild animals. All Belgium, from the Prince and Princess

de Cröy down to the humblest peasants, united in the effort to rescue as many of these men as possible from the vengeance of the invaders. Sick and wounded stragglers, English, French, Belgian, were brought to the door of Edith Cavell. She took them in, hid them, nursed them, fed them, gave them money, and arranged for their flight across the border to the haven of Holland. She knew, of course, that in time she would be caught. One after another, her friends disappeared. Marie Depage, who had first revealed the conspiracy to Edith Cavell, had gone to America to collect funds for Belgium, but she never came home; she was on the *Lusitania*, when the U-20 sent the Cunard liner to the bottom, without warning. Death was reaping a rich harvest in Belgian life. It was August when Edith Cavell arrived in Brussels to introduce trained nursing; it was another August when she saw the Germans march in; it was again August when the Germans took her away.

In the annals of conspiracy, the counterpart of Miss Cavell cannot be found. The Germans asked her if she had not helped twenty men across the border? No, she said, about two hundred. One of her judges remarked that she was foolish to have aided the English, because the English are ungrateful. No, she said, they are not ungrateful. How do you know? Because, she said, some of them have written to me, expressing their thanks after their escape.

Incapable of untruthfulness, she was the most peculiar of plotters: she assisted her accusers in the interest of accuracy. She had saved the lives of others, but she could not lie to save her own. She did not even wear her nurse's uniform to try to impress the court. In a forthright manner, Miss Cavell herself furnished the testimony against herself, which was her doom. In only one respect was Miss Cavell a deep disappointment to the Germans: she was not afraid.

The secrecy in which Miss Cavell was tried, the speed with which she was condemned, puzzled the diplomats of the day, and mystified the historians of the following generation. The Germans knew that few of the derelicts whom the English nurse expedited across the border became efficient fighting men again; they did not even pretend that she had conveyed military information to the enemy and thus harmed the German cause. Why then were they willing to outrage world opinion by shooting this woman? The crucifixion of Belgium had aroused the sympathy of mankind, and America shipped unlimited food for the



brave little country: England allowed the supplies from America to pass through the blockade. But the commission for relief in Belgium, if it saved Belgium from starvation, did at least as much for Germany: enormous amounts of wheat and lard, immense quantities of beans and peas, intended for hungry Belgians, found their way into German stomachs. Was it Miss Cavell, expert in nutrition, who informed England of the vast leakage? Was this the reason why she was really dangerous to Germany? Whatever the cause, the court-martial was swift and the verdict unequivocal. In the solitude of the death cell, the matron wrote, to her nurses, a last letter:

ST. GILLES PRISON

MY DEAR NURSES:

It is a sad moment for me that I have to say Good-bye to you. I am remembering that the 17th of September has seen the end of eight years of my direction of the school. I had been so happy to be called to help in the organization of the work our committee founded. In October of 1907 there were only four young pupils and now there are a great many of you, between 50 and 60 I believe, counting those who graduated and left the school.

On different occasions I spoke to you of the difficulties we encountered during the early days, even to the words "on duty" and "off duty" etc., for your hours; all this was new in the profession for Belgium.

Gradually one service after another was inaugurated—graduated nurses for nursing in private homes—pupil nurses—St. Gilles Hospital. We served in Dr. Depage's Institute, in the Buyssingham Sanatorium, in Dr. Mayer's Clinic, and now many have been called (as you perhaps will be later) to nurse our brave wounded.

If during the past year our work has decreased it is due to the tragic period through which we are passing; in better times our work will resume its growth in all its power of doing good. If I speak to you of the past, it is because it is sometimes well to stop and review the road we have traveled to take stock of our errors and our progress.

In your beautiful building you will have more patients and you will do all you can for their comfort and yours.

I am sorry I have not always been able to talk to you much in private; you know I have had much to occupy me, but I hope that you will not forget our evening chats. I have told you that devotion will bring you true happiness—and the thought that you have done your duty before God and yourselves, completely and with good heart, will sustain you in life's difficult moments and in the face of death.

There are two or three of you who will recollect the short conversations we have had together; don't forget them. Being already so far removed from life, I perhaps can see more clearly than you and point out the correct path to you. One word more. Guard yourself against slander. May I say to you—loving your country with all my heart—that is the great fault here. I have

seen, during these past 8 years misfortunes which could have been avoided or ameliorated if a word had not been whispered here and there without evil intention perhaps—but it has ruined a reputation, happiness, or even the life of someone. My nurses have a duty to think of this and cultivate among themselves loyalty and an esprit de corps.

If there is one among you who has a grievance against me, I ask you to pardon me; I have perhaps sometimes been too strict, but never intentionally unjust, and I loved you all very much, more than you imagined.

Wishing happiness to all my girls, those who left the School as well as to those who are still there, I thank you for the kindness you have always shown me.

Your devoted directress,  
EDITH CAVELL

Oct. 10, 1915

On the night of October 11, 1915, a frenzied scene was taking place. The American minister to Belgium, Brand Whitlock, was making a frantic effort for a last-minute stay of execution. The secretary of the American Legation in Brussels, young Hugh Gibson, was running around, trying to locate the German authorities. It was not easy, for the governor-general was lolling in a suburban villa, playing cards; the head of the political section was enjoying himself at a burlesque show, and refused to leave until it was over. The latter arrived, at last, with his assistants, pointing to the lateness of the hour, and assuring his visitors that nothing could be done. The Spanish representative in Belgium, Marquis de Villalobar, so sadly deformed in body and so highly gifted in mind and heart, did much of the talking. Eloquence that appeared irresistible was met by the German argument that they wished they had more old English nurses to shoot. The emissaries of mercy departed. The nurses of Edith Cavell's school, waiting in anguish, read the failure of their mission in their faces. Miss Cavell, unaware of these efforts in her behalf, but having been informed of her last hour, calmly jotted down in her prayer-book, after other entries: "Died at 7 A.M. on Oct. 12th, 1915."

The British chaplain in Brussels received from the prison of Saint Gilles, a note in German whose meaning was plain: "Come immediately, some one is about to die." As the Reverend Stirling Gahan entered the cell of the condemned, a woman, who had been lying on a cot, arose. A puritan to the last, she hastily put on a dressing-gown which she drew closely around her thin throat. The clergyman found her tranquil and



perfectly resigned. She said she had no regrets, and willingly gave her life for her country. The clergyman listened in amazement to the last words of his countrywoman: "I have no fear or shrinking; I have seen death so often that it is not strange or fearful to me. I thank God for this ten weeks' quiet before the end. Life has always been hurried and full of difficulty. This time of rest has been a great mercy. They have all been very kind to me here. But this I would say, standing as I do in view of God and eternity: I realize that patriotism is not enough. I must have no hatred or bitterness towards anyone." They partook of the Holy Communion together, and, then, her last interviewer said Good-by. The woman, who had smiled seldom, smiled her farewell to earth. Dawn came to Brussels at seven that October morning, and the Germans took her out and shot her. England was twice fortunate: the Crimean War gave her Florence Nightingale, and the World War gave her Edith Cavell.

In his despair, on that last night, the Marquis de Villalobar had cried aloud to Baron von der Lancken-Wakenitz: "It is idiotic, this thing you are going to do—you will have another Louvain!" The Spanish statesman was right. From the blood of Edith Cavell sprang thousands of armed men. Despite the tricks and the cynical lies, the burning of libraries and the wanton destruction of cities, the looting of homes and the murder of noncombatants, the diabolical tortures and the inhuman atrocities, the day came when the heavy heels ceased to crush the paved streets of Brussels. The German beast lay in the dust, prostrate in defeat. The king and queen of the Belgians returned in state to the nation's capital, amid the fervent cheers of the liberated people. A woman's body was removed from its prison-grave, and after memorial service in Westminster Abbey, was interred in Norwich Cathedral, which the living Edith Cavell had so often admired. The war was over, and the world forgot everything. . . .

Again, the heavy boots of the Germans resounded over the cobblestones of Belgium.

On September 23, 1940, the London Hospital, Whitechapel, London, E.I., celebrated its two hundredth birthday. The old hospital began its third century of service with a new vow: "We carry on to the last stick and stone of our ability to give succour and shelter." For the healing shrine was suffering from wide open wounds, and the staff worked

under fire in the midst of broken glass and heaps of rubble. A gallant captain entered the hospital to borrow a stethoscope, in order to listen to the peculiar rôles of delayed action bombs. German airmen were circling over the London Hospital, as over so many other hospitals, dropping their messages of hatred for humanity. A bomb fell at the end-gates, the windows of the long façade disappeared, and the John Ellicot clockface, which used to tell Benjamin Franklin the correct time, became only a hole in a shattered wall. Then a bomb hit the Alexandra Nurses Home, and an hour later the Eva Lückes Nurses Home was a ruin. As dawn broke on October 12, 1940, nurses of the London Hospital went to Charing Cross Road to pay tribute to their most illustrious alumna. They placed a wreath at the base of her statue. In that dawn, passersby could read on the pedestal the last words of Edith Cavell: "Patriotism is not enough. I must have no hatred or bitterness for anyone." By moonlight, German bombs continued to fall on the homes and the hospitals of London.



## XV

### Medical Sisters of the Soviet Union



PRELUDE. The harvest in Russia had been ominously meager, and in the next season (1892) the famine spread from Moscow beyond the Ural Mountains. Thirty million human beings could not obtain enough to eat. In the single province of Samara, five hundred thousand cattle, as many horses, and thrice that number of sheep perished from lack of food. This was to be expected, because as Leo Tolstoy explained to the American Doctor Hubbell, the peasants had only enough land to keep themselves from starvation in the best seasons, and in a year of scarcity destitution was inevitable. Since the emancipation of the serfs, has there been improvement in the condition of the peasants? asked Hubbell. In the way of property, no, but mentally there has been progress and development, answered the Russian author. Tolstoy, who gave all his time to mitigating the suffering caused by the great disaster, added that the government might not like to hear all he was saying. Tolstoy sent his love to Hubbell's chief, Clara Barton.

Hubbell wore high, upstanding collars, with a large stickpin in his necktie. His copious mustaches came down over his lower lip, and he had extraordinarily long side-whiskers. Hubbell was a capable worker, and was now in Russia as the general field agent of the American Red Cross, awaiting the arrival of a ship of mercy from the United States. The Russian famine had aroused the interest of the Iowa authoress, Alice French, "Octave Thanet" in literature; the Iowa journalist, Benjamin Franklin Tillinghast, caught the fire of her sympathy, and soon all of Iowa was aflame: "The whole State joined in a triumphal march bearing corn, God's best gift to man."

There were dissenting voices in America: some said that starving Russian peasants would rather die than eat strange food; others declared

that corn could not stand ocean transportation without spoiling; others affirmed there were no mills in Russia to grind corn; and a leading financier asserted we might as well ship a cargo of pebbles as a cargo of unground corn to Russia. Despite these dicta, one of the most spacious ocean freighters of the day, the British steamship *Tynehead*, was chosen to carry the abundance of the soil of Iowa from the port of New York to the Gulf of Riga. The master of the ship was Captain Carr, a born-to-the-sea Briton, who was at home in storms, and had been tossed around by the waves of every ocean; in the midst of battle he would have stood as straight as his masthead, but he lost momentary control of himself when he learned the nature of his cargo. His weather-blown sailors bowed in silence, and eyes that had not wept for years grew moist. They thought they knew the secrets of the Seven Seas, but never before had they been charged to deliver free corn to starving people.

The sailing of the *Tynehead* caused uneasiness throughout official Russia, for it was rumored that on board were persons of liberal views, avowed enemies of the czar's government, who could neither be recognized nor received. When it was ascertained there was not a man on the ship except its captain and its own officers and crew, elaborate ceremonies were planned to welcome the *Tynehead*. Here Hubbell intervened, writing to the president of the Red Cross of Russia:

I trust your excellency has already understood that no public demonstrations are desired. This cargo is largely from the people of an agricultural State, many of whom have suffered from failure of crops in their own country, and thus keenly appreciate similar conditions that others may suffer when such a vast territory as the interior of the Russian Empire is denied rain season after season in succession. At this particular time they feel that perhaps the same rains that had been withheld from their brothers in Russia had given the increase to their own crops, which have been unusually abundant the past year; and thus added duty to desire. Moreover, there is a deep brotherly feeling throughout the nation; for our people never forget that Russia has always been the friend of America.

Hubbell and his official party journeyed from St. Petersburg to Riga to await the arrival of the *Tynehead*. They found they were not the only ones waiting, for 240 peasants had camped on the docks, waiting and waiting for the ship from far-off America. These peasants were not waiting for food, for Riga was not in the famine zone. They were waiting for the honor of unloading the good ship that brought food



for their brothers in the interior. They begged the privilege of unloading the entire cargo themselves, and worked day and night without rest. On the third night the American consul could endure it no longer, and insisted that they stop for twelve hours. They waited for the twelve hours to pass, and then all were in their places again, and would not budge until the last scrap of cargo was removed from the ship. With the men, in the ship and on the dock, worked a group of women, their skilled needles sewing up holes and mending weak spots in the bags to prevent any waste in handling. Both the men and the women refused payment for their labor.

Hubbell's injunction that there be no public demonstration over the cargo of the *Tynehead*, was not strictly obeyed. At his hotel, the Russian and American colors were crossed over the entrance. Looking in the shopwindows, he was surprised to see sheet-music of "Hail Columbia," "Yankee Doodle," and "The Star-Spangled Banner." Russian boys marched through the streets, carrying homemade American flags. One small lad had devised a double banner, one side being the Russian flag, the other side the American. In traveling through the famine region, Hubbell found that the peasants ground the corn in the windmills, and baked it in their brick ovens, producing old-fashioned New England rye and Indian loaves. A small quantity of the corn that had become wet when put into the ship during a rain in New York and had begun to heat when unloaded, was sent to Saratoff with the suggestion that it be given to the cattle: the peasants looked at this corn and washed it and dried it, turning it into good bread. Not a grain of Iowa corn was wasted in Russia.

The Russian Red Cross was of special interest to Hubbell, the old warhorse of the American Red Cross. Russia had her Sisters of Mercy, distinguished for devotion and heroism in military campaigns, but like the nurses of medievalism they belonged to religion rather than to science. The Russian Red Cross (1867), known as the Red Crescent in the Mohammedan sections of the country, was the dominant factor in nursing under the old regime. These voluntary Red Cross nurses, usually members of the aristocracy, took a two-year hospital course, but their social standing, though it gave them the education unattainable by the women of the masses, prevented them from fulfilling the duties of a nurse: as no one in Russia expected young ladies of the upper

classes to perform menial tasks, they went on missions accompanied by their maids, and the actual care of the patient was left to servants.

Some of the Red Cross nurses broke with tradition, like those described by Hubbell (1892):

In the afternoon we visit different villages, some twenty houses or more. We find two Red Cross nurses from Moscow, who are at work and have their home with the peasants. In four months one has lost but four cases; the other but two; and the average number of sick in the past four months by the doctor's report is three hundred. The peasants say they would rather do without the doctor than be without the nurses in the village.

Mother Russia was fertile in human material, ripe for unfoldment, but under the old regime the soul of the Russian people withered beneath the shadow of official stagnation and corruption and oppression. The verdict of the world was justified: Dark Russia.

THE RUSSIAN REVOLUTION. Again the granaries failed, and there was no fodder for beast, or food for man. The famished people chewed bark leaves, and dug roots out of the earth. Mothers fought for scraps of horse-dung to mix with polluted river water for their babies, and men fought over the carcasses of decaying animals. In the atavistic fling-back in the shadow of hunger, human beings ate the flesh of human beings. Nature now perverted its own instincts, and parents and children abandoned each other. In the despair that casts aside restraint, the curve of syphilis arose to unprecedented heights. The louse crawled over the land, bringing typhus to thirty million people. The *Anopheles* mosquito, inhabitant of warm regions, carried malaria to the Arctic Circle. One-third of the medical profession perished, and the survivors had no soap to wash away filth, or drugs to combat disease: they treated malaria without quinine, attacked infection without antiseptics, and amputated limbs without anesthetics. Class war and civil war divided the country against itself, and in many districts not a village was left intact. Other nations blockaded this land, and sent armies to help native bandits destroy the world's first government of workers and peasants. Such was Russia in the aftermath of the first World War.

Amid this modern dance of death, life went on. Unpaid actors performed in unheated theaters for audiences that shook with cold, but applauded with enthusiasm. Ragged engineers, sitting in darkened



factories, saw Russia ablaze with light as they planned the electrification of their nation's industries. The hand of Lenin, signing the Peoples Commissariat of Health, inaugurated a national experiment in health whose scope is without parallel. The task of building the New Russia, the Union of Soviet Socialist Republics, was more difficult than erecting pyramids to Cheops. The wheels of history that moved Lenin and his comrades from exile and prison to power, placed them at the lead of the largest country on earth, occupying one-sixth of the land surface of the globe, peopled by 180 races who were deliberately segregated by czarist policy, and conditioned to suspicion, hatred, and murder.

The Soviet Union began from the beginning. No Russian peasant had lived and died without becoming well acquainted with priest, gendarme, and tax-collector, but generations of these peasants had lived and died without ever seeing a teacher, a doctor, or a nurse. Since the days of the Nihilists who first went among the people and were confronted with the Romanoff ultimatum, "No schools allowed!" until the days of the last czar's Minister of Education who publicly declared that if the masses were taught to read they would rise above their station, it was a crime in the old Russia to teach a peasant the alphabet of his language. Before the Revolution, there were numerous villages in which not a single inhabitant could read a single word. It was necessary for the new Russia to begin with the alphabet.

TRAINED NURSE: RUSSIAN STYLE. For the building of the new Russia there was a lack of machines, and of men who could work the machines: a Ford car in Russia was an event; a farm tractor, a victory; and the arrival of a foreign engineer, a cause of jubilation. Equally serious was the dearth of doctors, midwives, and nurses, and it was necessary to use whatever was available. Under the old regime, competent medical service had been available for the nobility and the wealthy classes, but as workers and peasants could seldom afford a physician, there developed that Russian phenomenon, the feldsher, and his female facsimile, the feldsheritza, who were semi-qualified doctors. As half-doctors were better than none, it was decided to retain the existing feldshers and to train new ones until the number of fully qualified doctors was sufficient. Russian district or Zemstvo medicine (1864), established after the abolition of serfdom, was the first organized attempt in any country to bring

scientific medicine to the rural population: from this community medicine stemmed the socialized medicine of the Soviet Union. The new regime modernized, but did not originate the Russian midwife, as she was indispensable in this vast land, and schools for her training had been founded in Moscow and St. Petersburg as early as the eighteenth century. The new regime expanded the Red Cross and the Red Crescent until they reached the remotest hamlets in which they were the first to fight disease and the first to teach health education.

There was no Russian pattern for the trained nurse, and the Soviet Union created her. It was a difficult task, for a woman who went into health work, if she did not possess the requirements to become a doctor, preferred the better established and more independent careers of midwife or *feldsheritza*. At a time when venerable precedents were shattered, and immovable barriers were overthrown, and society itself was recast in the new mold of the revolution, the trained nurse was too much of an innovation for immediate acceptance. Patients in Russian hospitals, never having known the trained nurse, joined the staff in resenting her presence. In the period of transition, these early nurses must have been bewildered at themselves, for their courses, as pointed out by a sympathetic American nurse, were really miniature medical courses with most of the art of nursing omitted. An important conference was held at Moscow to plan a standardized curriculum for training schools for nurses, and not a single nurse was invited to be present. In the following year (1928), the status of the nurse in Russia was expressed in one crushing line: "Many doctors can still be found who declare that they would rather run a hospital without nurses."

Both the Commissariat of Health and the Commissariat of Education were groping and stumbling, experimenting and discarding, but always moving forward. The trained nurse of the new Russia, known as medical sister, took her place among the health workers of her country, and, ceasing to be a novelty, became a necessity. A decade after the nurseless conference on nursing at Moscow, ninety-five thousand applicants were enrolled in schools of nursing to be trained either as medical nurses or as nursery nurses. The requirements were seven years of elementary school, followed by a course of two years of two semesters each (48 weeks) in the technicum. The authorities realized the inadequacy of this instruction, but they withheld the third year because



of the desperate call for nurses from the rising industrial centers, social organizations, and distant rural sections. With the coming-of-age of the Soviet Union (1938), the curriculum for medical sisters was as follows, the figures indicating the number of hours allotted to each subject:

Russian language, 92; mathematics, 69; Latin, 46; history of USSR, 200; anatomy and physiology, 184; biology (theory of evolution), 69; physics, 92; chemistry, 92; general pathology, 46; hygiene (with sanatorium work), 69; pharmacology and prescription writing, 116; sanatorium defense preparation (in case of war), 92; physical culture, 92; internal diseases (medical technique, how to take care of the sick), 389; surgical diseases (and care of the sick), 348; infectious diseases, with microbiology, 152; children's diseases and their care, 182; gynecology and obstetrics, 117; dermatology and venereal diseases, 63; neurology and psychiatry, 88; physical therapy and massage, 42; ophthalmology, 37.

The total hours, 2,880, spent in study and examination, were about evenly divided into theory (49.2 per cent) and practice (50.8 per cent). The examination in anatomy and physiology was held at the end of the first semester, in pharmacology and prescription writing at the end of the second semester, in pediatrics and in infectious diseases at the end of the third semester; at the end of the fourth semester the state examination was held, which included examinations in internal diseases, surgical diseases and first aid, infectious diseases and microbiology, history of the USSR, and sanatorium defense. To outsiders it appeared unprofessional for nurses to devote more time to the study of the history of their country and to defense against war than to anatomy and physiology.

Conditions may make it necessary for a young trained nurse to go to an outpost of the republic, among nomadic races, where the only evidence of the new regime is one large institution known as "cultural combines," consisting of school, workshop, moving-picture theater, veterinary station, and hospital. Letters written by these nurses from wild and distant regions indicate that although they suffered from loneliness and sighed for civilization again, they upheld the noblest traditions of White Caps. Just as the intelligent feldsher is urged to become a fully qualified physician, so the technicum-trained nurse who makes a good record in the state examination and is genuinely interested in health work, is encouraged to enter the university and prepare

herself for the higher medical personnel. Whoever she is, she has the aid of the state, as there is neither sexual nor racial discrimination in the new Russia.

After the First World War, following intervention in Siberia, the American Red Cross, in addition to large hospitals at Tumen and Omsk, maintained smaller ones at Nivo-Nikolaevsk, Omsk, Petropavlovsk, and Cheliabinsk for the treatment of typhus. As the number of American nurses was limited, these hospitals were staffed by Russian nurses, who are thus mentioned in the report (June 30, 1919) of Alice St. John, chief nurse of the Siberian Commission: "My experience with the Russian nurses has convinced me that one of the serious obstacles to their efficiency is their own lack of knowledge of personal protection. Many go about in bare feet, exposing themselves needlessly to infection; as a result, the percentage of nurse infection is very high and the mortality proportionate." This untrained, barefooted nurse was characteristic of the Russian nurse before the Revolution (1917); the coming-of-age of the Soviet Union in 1938 is an appropriate time to look at the new type of nurse.

THE NURSE IN THE RAILWAY STATION. Traveling would be pleasant were it not for the journey. A railway station at the end of a journey is one of the most depressing places in the world: crowds, clamor, and confusion; passengers tired, dirty, and hungry, the children sleepy and cranky; frantic calls for porters to carry the baggage; futile inquiries and bewildered faces; whether the travelers go up or whether they go down, they find no comfort in marble stairs, and the overwhelming desire of everyone is to get out of the station as quickly as possible and reach hotel or home. The Soviet Union, often criticized because its trains do not run on time, has turned its railway stations into protective oases by establishing, at important terminals, "Rooms for Mother and Child."

At the Kazan Station in Moscow, the rooms for mother and child were never closed, and aside from technical personnel, a physician and twelve trained nurses were always in attendance. Since Russia is a land of many races, not all of whom understand Russian, several of the nurses were representatives of the national minorities. About four hundred children were treated daily in these rooms, where they remained for



varying lengths of time. Upon entry, the child was examined by the doctor, and if there was any evidence of disease, neglect, or malnutrition, appropriate measures were taken. This included plain speaking to the mothers, whose attention was called to the brilliant health posters on the walls. The majority of the children, glowing with health and vitality, were divided into groups up to four years, and from five to twelve years. The children took shower baths, and while their clothes were being disinfected, put on sterile garments and were fed if hungry.

The children were now ready to rest or to play in the rooms: if their parents had matters requiring attention, they left the children in the rooms under the supervision of the medical sisters. Arrangements might be made for the children to remain overnight, since the rooms had nearly a hundred beds. When the weather is favorable, the children frolic in the railway garden, carefully guarded by the medical sisters who are obviously proud of the health and beauty of the youngsters.

**THE NURSE IN THE DEPARTMENT STORE.** The Russians were proud of their stores, but they were unimpressive to a foreign visitor to whom the merchandise appeared scant and the shoppers numerous; to escape from both he might seek the quietude of the basement which appeared to be unoccupied. To his surprise a nurse blocked the doorway, informing him he could not enter until he had put on a gown. Having arrayed himself in the sterile gown, he surveyed the clinic: a doctor and nurses were in attendance, and a child was being examined. But it was not a clinic, unless the child was found to be sick: it was simply a convenience for the shoppers upstairs, and a delight for their offspring. These children's rooms in the department stores contained games and moving-pictures, aquaria with exotic fish, while in various cages are squirrels, guinea-pigs, and parrots. An enthusiastic tot was apt to seize the hand of a visitor he had never seen before, and drag him to inspect an amusing turtle.

Items from the newspapers of many countries pricked the memory: a mother leaves her children alone in the apartment to go shopping, and upon her return finds—tragedy. When the Soviet mother went shopping, she took her little children with her and placed them under the care of the medical sisters. It was safer than home itself, and in addition to entertainment and instruction, the little ones received the bene-

fits of preventive medicine. There was no charge for this service. The Soviet converted its department store, like its railway station, into a pleasant refuge and a hygienic center. It is a contribution to medical sociology worthy of the widest adoption.

**THE NURSE IN THE CRÈCHE.** The *crèche*, where the working mother leaves her infants during the day, originated in France (1844), and the world *crèche* is a French term meaning both a manger, for beasts, and a crib, for children. The primitive *crèche*, consisting of a room or two, was in charge of a nun, or sometimes of a so-called motherly woman, whose assistants rocked the children in willow cradles. The value of fresh, moving air was unknown, and the modern concepts of infant welfare and mothercraft were unborn. These original day-nurseries were dismal and unsanitary institutions, but they persisted because they were necessities, and they spread wherever mothers in poverty were compelled to work outside the home. After the first World War (1918), there was a total of four *crèches* in all Moscow. In 1938 there was a wide network of *crèches* throughout Russia, attached to shops and factories and to offices of all types; to fields and farms in harvest-time; and to university dormitories, so the students might marry and rear children during their school life.

Upon entering the reception room of a Russian *crèche*, the mother undressed her child, placed it naked in the hands of the nurse, and put the home clothes in an individual locker; if the mother was still nursing her baby, she came back at stated intervals; otherwise she did not revisit the *crèche* until the end of the working day. The nurse wrapped the infant in a sterile sheet, and after taking its weight, took it to one of the pediatricians for examination. If the child was dirty or verminous, the mother was called from work to receive a realistic lecture on the principles of hygiene; both mother and child were sent home, and until inspection of the home demonstrated that the sanitary information had been learned, the mother was not permitted to return to work, and the child was not permitted to return to the *crèche*.

*Crèche* children were divided into three groups: in the first, their world was mainly limited to the crib, where they received far more psychological study than they realized; at the seventh month, when they had attained the crawling age, they were placed in the second group and



their education really began; after the first year, they became members of the third group, and were the seniors of the crèche. The crèche age was up to three years, as after that time the child had reached kindergarten stage.

The normal working life of the crèche revolved around the nurses, who had been especially trained in child care. The crèche nurse received the children upon entry, supervised them at sleep and rest and during their tremendous activities, swabbed the nipples of the mother's breasts with an antiseptic solution when she came to feed her baby, answered any questions that might arise, returned the child to the mother at the close of the day, again answered questions or further instructed the mother, and when necessary visited the home. In most countries, home visiting is resented because it carries with it the bitter stigma of charity, but it was welcomed in the Soviet Union because the nurse came as a health worker, a teacher, and a comrade.

**THE NURSE IN THE PARK.** If the Soviet world, like the ancient world, listed its seven wonders, among them would be the Maxim Gorky Park at Moscow. There are a great many parks throughout the Soviet Union modeled on the mother-park in Moscow, which in 1938 was alive with workers in their eternal caps and blouses, bearded and booted old peasants with wondering eyes, soldiers in uniform, natives enjoying the acres of gardens, tourists from foreign lands passing from the tree-shaded paths into the buildings, and the youth of Russia walking together and singing along the Moskva River.

The park was a shrine to preventive medicine, for its manifold activities would have been impossible without the presence of physicians and trained nurses. In addition to their instruction in hygiene, and their admonitions to recent converts not to be over-zealous in calisthenics or sunbaths, they were the silent watchers of the multitude. They formed the background of the more than one hundred thousand individuals who daily visited the park—on special occasions the number was doubled—and as a rule few noticed their examining rooms and first-aid stations. But in accident or injury, or sudden case of sickness, when the call for medical aid was heard, doctor and nurse were on the scene. Parents who entrusted their children to the park throughout the day, learned to feel secure because of the comforting proximity of the White Caps.

THE NURSE IN THE CRIMEA. Nature was an artist when she created the Crimea. Cedar and cypress in profusion and tall firs and palms towering over groves of flowering magnolias, with unbroken chains of vineyards and dream-villas on mountain-cliffs against the background of a perfect blending of sea and sky, make the Crimea one of the beauty spots of the earth. After seeing the Alpine Crimea and the south coast, it becomes apparent why the royal family and the nobility built their summer residences here, and it is equally apparent why Lenin decreed after the liberation of the Crimea (1920) that all the royal palaces and all those belonging to the nobility should be converted into sanatoria for the toiling masses. With the co-operation of the climate, the Soviet Union turned the Crimea into the health resort of the nation: the region was dotted with palace-sanatoria, polyclinics in mansions, and recently built resthomes in newly planted health parks.

In Livadia, the white granite palace of Nicholas II was now the Stalin Sanatorium. In the leather chair of the last of the czars sat an old swineherd from the Ural Mountains, reading the latest issue of *Pravda*. In exquisite bedrooms where the czarina stretched her regal form, dreaming of Rasputin, sun-browned peasant women now rested their honest buttocks. The adjoining guesthouse of the Romanoffs still invited guests, but they were workers. From the windows of the palace and through the alleyways of the park there were wonderful views of mountain and sea, extending to Yalta; the watcher also caught numerous glimpses of the trained nurses as they passed back and forth on their tasks, for they had become as much a part of the scenery of the Crimea as its sun-brightened shores or the moonlight over its crags.

The flowers of Alupka made a path to the sea, beyond which the visitor saw the forest-covered slopes of Holy Peter's Mount. Before reaching the camp there was heard the joyous din of merry children, but it was the gaiety of the brotherhood of pain. The children lay in their sun-flooded beds, surrounded with toys, and called happily to each other. These children did not walk through the woods or climb the surrounding green hills, for tuberculosis of the bones is a chain that ties children to their beds. When a victim of this affliction was first separated from his home and family, he wept as if he would never be comforted, for loneliness was added to illness. The days passed, and he learned to accept the



inevitable. Then the peace of Alupka descended upon him, and he became aware of other beds with other children.

Time dimmed the memory of the faces at home, the sun at Alupka was good, and the beds stirred with life and laughter. When a stranger approached, the children shouted in greeting and rose to exhibit their toys, and the nurses came running in alarm and told them to lie down again. These nurses were not the modernized medical sisters that one saw in the hospitals and polyclinics of Leningrad and Moscow and Kharkov and Kiev; they were old women who had been especially trained for a long and difficult task. These nurses were wrinkled and old, with warts and moles on their faces, but in their eyes shone infinite love and compassion. The bedridden children of the Crimea had two mothers: the half-forgotten mother in a far-off home, and the ever-present mother who took care of them in the camp at Alupka.

Before the Russian Revolution, the word vacation was not in the vocabulary of the children of the workers and peasants. Doomed to toil from their earliest years, they passed their lives, as the generations before them, in unrelieved and hopeless poverty. In 1938 vacation camps stretched throughout the vast land, and they were planned with as much forethought as a biological institute or a hydrodynamical laboratory. Millions of Soviet children were sent on annual vacations, free of charge. The camp for Young Pioneers near Yalta, at Artek in the Crimea, was an honor camp in the sense that children who distinguished themselves during the year were rewarded by a vacation at Artek. Nature is indeed enchanting here, and Artek was an all-year-round camp, for it is as beautiful in its winter garments as in its summer green.

At Artek there was a sanatorium camp, primarily devoted to the health-protection of the Young Pioneers. The children were examined before coming to the camp, and re-examined soon after entering. Their schedule varied according to their condition, as some required special food, or prolonged rest periods, while others needed more physical exercise. The health record of every child was kept in a separate booklet which he took with him when he went home and gave to his own doctor. The benefit of periodic health examinations had been conferred upon the youth of Russia. The children in Artek might be thousands of miles from their families, vigilantly watched by their vacation mothers, the

trained nurses, without whose services such health camps would be impossible.

THE NURSE IN SOVIET ARMENIA. Tradition put the Garden of Eden in an Armenian valley, but geography placed Armenia on the crossroads of Asia and Europe. Invaded, partitioned, ravaged, oppressed, despoiled and betrayed, the vineyards and tufa fields of Armenia were the hunting grounds of conquerors from the days of Alexander the Great, Jenghiz Khan, and Tamerlane, to modern times. For generations it was the fate of the Armenian to plant his crops in the spring, and water them with blood in the autumn when the Turk gathered the harvest. Every new massacre paved the way for greater massacres to come. Survivors fled to mountains and deserts, or wandered as refugees over the earth; others clung to their semisubterranean dwellings, living as did their biblical ancestors. Members of the American Women's Hospitals (1919-20) who arrived for relief work in Armenia, found hell in the Garden of Eden: as the snow melted in the spring, a crop of Armenian corpses was revealed on the hillsides.

The meteorological station, erected by the Academy of Science of the USSR on the summit of Armenia's highest mountain, was symbolic of the new life of the nation. Before the revolution, there were six or seven hospitals in all Armenia; there were thirty doctors in the entire country, concentrated in the cities of Erivan and Alexandropol, and none was available for the mass of the pastoral and agricultural population. Since then, hospital after hospital was built; tropical stations and departments of veterinary medicine were opened; every district had medical and nursing service, reaching the farms and sheepfolds and cotton-plantations of Armenia. Large numbers of orphans and homeless waifs, part of the bitter heritage left to Armenia by the first World War, became the children of the Soviet Union. Thousands of workers and collective farmers spent their vacations in the new health resorts of Armenia, among the pine forests of Delizhan or by the cobalt waters of the mountain-lake of Sevan. As resthomes and spas arose where nature had waited for centuries, and more and more doctors and nurses appeared, the ancient land of sorrow developed into a modern health center.



THE NURSE ON THE FARM. Nowhere was the upheaval of the Russian Revolution more violent than on the little farms of the peasantry, who resisted the collectivization of their land with bitterness and blood. In old barns with a wooden plow and a single horse and cow, amid individual rye fields and wheat fields isolated from neighboring farms by hard ridges of earth over which the plow could not pass, was waged the real warfare between the old and the new. The peasants shared their cottages with their farm animals, and between the two groups there was no striking divergence. Confined during the long winter in his snow-buried hut, imprisoned after rain by roadless mud, it was observed that the muzhik differed from the beasts with which he lived only by drinking vodka and beating his wife. Arrogant and harsh to his family, the peasant bowed low at the approach of a stranger, and cringed at the sight of a uniform. The death of a horse or a cow spelled tragedy to a peasant, and the wailing was louder than at an infant's death. The peasant woman, big with child, working until the last moment, gave birth to her baby behind the bushes in the open fields, and continued her work. In the rural districts was hidden the deep darkness of old Russia.

In 1938 the collective farm (*kolkhoz*) was the strength and pride of Russia. It is a community with meetinghall, school, maternity home and hospital. A collective-farm mother, like all Soviet mothers, stopped work for two months before the birth of her offspring and for two months after; during this period she received her full salary, and expert care was provided free of charge. Whenever necessary she brought her child for examination in the consultation department of the maternity home. Physicians, dentists, midwives and nurses comprised the medical personnel of the farms which gave Russia her food. These farm-communities were centers of industrialized agriculture, and of educational and hygienic activities which frequently required the services of the medical sisters. Against the background of the caterpillar tractor and the combine and the thresher, the White Caps took their place in the pregnant fields of Russia.

THE NURSE IN THE PROPHYLACTORIUM. The Soviet Union, which failed in its efforts to prohibit the drinking of vodka, aroused skepticism when it announced its determination to eradicate prostitution. This appeared

to be utterly impossible in Russia, where prostitution had not only been tolerated, but officially encouraged; under the old regime, whenever a new house of prostitution was opened, it was blessed by the priest. Jewish girls, who wished to study in the universities of Moscow and St. Petersburg, but were not allowed to live in these cities because of their race, secured permission readily if they obtained the yellow ticket of the prostitute—and they were harassed by the police, not if they practiced prostitution, but if they did not.

The economic chaos during the war and in the postwar famine, resulted in an enormous increase of prostitution throughout Russia, but against all the experience of the past the new regime decreed the end of prostitution. The approach to the problem was the opposite of all previous attempts: the prostitute was not regarded as the accomplice of Satan, the temptress of man, the scarlet woman whose sin is beyond redemption; she was not stripped naked in the presence of jeering spectators, flogged, and plunged into icy rivers; she was not mutilated, nor was her consort denied the Sacrament; she was not trapped by the spies of a vice squad, prosecuted, and persecuted, or sentenced to jail as a criminal.

The new regime tore up every yellow ticket in exchange for the passport of rehabilitation. Many of the prostitutes were under sixteen years of age, the majority were afflicted with gonorrhea and syphilis, and most of them were illiterate. The remedy was plain to the realists of Russia: treat their venereal diseases, teach them to read and write, and train them for a good job. Inexorable tradition was thrust aside when for the first time the problem was removed from the domain of the police and placed in the hands of the Commissariat of Public Health. The result was the birth of that unique Soviet institution, the prophylactorium, a combination home, restaurant, school, clinic, and workshop. Life in the prophylactorium was so advantageous that entrance was a privilege, and the only disgrace was expulsion.

The inmates of the prophylactorium were treated with respect, and immediately began to earn their own living, receiving the same wages as others in the Soviet Union. The mentally subnormal and the biologically promiscuous constituted special problems, but for the majority the prophylactorium was the road to social redemption. Aside from elementary instruction for the illiterate, there were classes in singing,



dancing, acting, literature, art, and science. Some of the girls did not advance beyond the stage of sewing and mending grain bags, but no roads were closed to those of ambition and ability. Former inmates of the prophylactorium became factory inspectors, public officials, and honored members of the Communist Party; some became teachers, writers, actresses; every avenue of normal human activity was open to them. As their sojourn in the prophylactorium brought them into intimate contact with trained nurses, several of them became medical nurses and nursery nurses. Many married and became the happy mothers of healthy children, brought up under the social security guaranteed by the constitution.

Throughout the great adventure in the regeneration of lost women, trained nurses were indispensable in the investigation of home conditions and in the hospitalization aspects of the prophylactoria. The closing of the last prophylactorium in Moscow in 1938 was a sign that an ancient evil had died in the new Russia. The medical sisters of the Soviet Union were among those who helped to write in their country a practical conclusion to the oldest profession in the world.

**RUSSIAN NURSE.** The trained nurse is not as distinctive a figure in Russia as in other countries, for she is part of the general medical personnel, a member of the Medical Workers Union, which includes the physician, university-trained dentist and pharmacist, feldsher, technicum-trained dentist and pharmacist, midwife, medical nurse, nursery nurse, laboratory technician, hospital orderly, mud-bath attendant, laundress, stove-man and ambulance driver. The trained nurse of Russia thus appears to lose her identity in the vast network of national health, but she is a vivid enough figure, and if at times she must act as part-physician and quasi-pharmacist, it should be remembered that a nation as youthful as the Soviet Union is still in a transitional stage; neither should its limitless spaces nor the immensity of its population be forgotten.

The trained nurse of Russia serves where she is needed, and she is needed in the rooms for mother and child in the railway stations, and in department stores; in the crèche of shops and factories and offices and in the parks and farms and camps; in night sanatoria and in forest schools. She is seen at Kherson, where the highroad covers the dust of John Howard, whose memorial slab greets the wayfarer with

the words: "Whoever you may be, you are at the grave of your friend." She may sigh for the modern plays in the Moscow Theater of the Revolution, or prefer the flowery profusion of sun-warmed Yalta, but she will go to Lapland before the first swans appear or the cod swims in from the sea, before the stately birches unfold and the Arctic willows bloom. She journeys by train, boat, automobile, wagon, ox-cart, reindeer-sledge, and on a camel's back; she travels to regions too remote for the horse, and inaccessible to the mule, to outposts that can be reached only by airplane and parachute.



## XVI

### American Nursing in the World Wars



#### FIRST WORLD WAR

SOPHIA F. PALMER. The area which the Indians called Uncataquissett was changed by the white men into Milton, Massachusetts. On its Blue Hill, signal fires burned during the American Revolution. In this little town was born Sophia Palmer (1853-1920), who lit many signal fires for the nurses of America. A student at the Massachusetts General Hospital when Linda Richards was directing its nursing school, Miss Palmer was a private-duty nurse for several years, after which she served as superintendent of nurses at St. Luke's Hospital (New Bedford, Mass.), Garfield Memorial Hospital (Washington, D. C.), and Rochester City Hospital (Rochester, N. Y.). She was one of the organizers of the American Nurses Association, and as one of the most effective workers for state registration she became the first president of the New York State Board of Nurse Examiners.

Miss Palmer's real field, however, was not the hospital, but the editorial desk. As editor of *The Trained Nurse and Hospital Review* and subsequently as first editor of the *American Journal of Nursing*, a position she retained for the remaining twenty years of her life, Miss Palmer was America's first important nurse-editor. She began to edit the *American Journal of Nursing* within the limits of her own room, but its message reached the nurses of the nation. Miss Palmer's pen was not dipped in balmy sunshine or in sugary complacency; frequently it was steeped in acid, and her editorials were sharp and bitter. Miss Palmer was definitely a fighter, a pioneer, and a leader of her profession.

In getting out the issue of October 1916—the journal had been founded October 1900, and its year still began with that month—Miss Palmer

was off form. At any rate, she indulged in rare dreaming, for she wrote: "The year opens with every indication that conditions in our own country will remain undisturbed and that we can look forward to a long period of quiet steady effort." In a short time this prophecy looked silly: within four months, diplomatic relations were severed with Germany; within six months, we were at war with Germany; within ten months, an article in the *Journal* announced, "Now that American troops are on French soil . . ." So our soldiers were overseas, and that meant nurses were needed.

ARMY NURSE CORPS. When the United States could no longer avoid war, there were 233 regular nurses and 170 reserve nurses in the Army Nurse Corps: this diminutive corps was merely another symptom of the general unpreparedness of an unmilitary country for war. Due largely to the vision and driving power of Miss Delano as director of the American Red Cross Nursing Service, the corps began to expand rapidly: in the brief time that elapsed between our entry into the war (April 6, 1917) and the signing of the armistice (Nov. 11, 1918), the Army Nurse Corps increased from 403 to 21,480 nurses. To obtain this expansion, a relaxation of rules was necessary: the age limit of 25-35 years was modified to 21-45 years; registration, previously enforced, was waived; citizenship of any allied country was accepted; instead of sacred passports based on birth-certificates, whose location wasted precious time, nurses wearing a military uniform were authorized to enter Great Britain and France with a mere certificate of identification, issued by the War Department, and a photograph. These sensible waivers must have made certain officials extremely uncomfortable.

AMERICAN RED CROSS. Before and after the armistice, the American Red Cross established hundreds of base hospitals, military hospitals, convalescent hospitals, maternity hospitals, refugee hospitals, sanatoria, infirmaries, dispensaries, ambulatoria, dental clinics, relief trains, typhus trains, tuberculosis pavilions, recreation clubs, homes for nurses, schools of nursing, children's bureaus, crèches, soup kitchens, milk stations, orphanages, child health units, training courses for public health visitors, and welfare expositions in the devastated war zones and wherever help was needed. In many countries ARC spelled aid and relief and com-



passion. An interesting chapter is compressed in the line: "Civilian Relief Stations (nurses assigned there) on Samos, Chios and Mitylene." The American Red Cross brought its health banner to Crete, Athens, Petras, and elsewhere in Greece; Rome, Florence, Genoa, and other cities of Italy; Jerusalem, Jaifa, Tiberias, and other regions of Palestine; it worked at Scutari (not the Scutari of Florence Nightingale on the eastern shore of the Bosphorus, but the Albanian town of Scutari); it planted its hospitals and nursing centers in Austria, Czechoslovakia, France, Great Britain, Hungary, Montenegro, Poland (child health units in 140 Polish towns), Rumania, Serbia (much public health nursing and general relief), Siberia, western Russia and the Baltic states. The first World War was the flowering period of the American Red Cross.

CHIEF NURSES IN ARMY HOSPITALS. The following nurses were Chief Nurses of fifty Base Hospitals which the American Red Cross organized for the United States Army: Mabel K. Adams (Presbyterian and County Hospitals, Chicago); Grace Allison (Lakeside Hospital, Cleveland); Bessie Baker (Johns Hopkins Hospital); Beatrice Bamber (Bellevue Hospital); Laura Beecroft (University of Denver Medical School); Helene D. Bengston (Metropolitan Hospital, N. Y. City); Elizabeth Bogle (Good Samaritan Hospital, Lexington, Ky.); Katherine Brown (Hospital of the Protestant Episcopal Church, Philadelphia); Janet Christie (Presbyterian Hospital, N. Y. City); Margaret B. Cowling (University of Virginia Hospital); Mrs. A. S. Crane (University of California); Carolyn Dantzler (Emory University Hospital, Atlanta, Ga.); Margaret A. Dunlop (Pennsylvania Hospital); Alice Flash (Massachusetts Homeopathic Hospital); Julia O. Flikke (St. Joseph, St. Mary and Augustana Hospital, Chicago); Mary L. Francis (Roosevelt Hospital, N. Y. City); Belle M. Fraser (University of Washington Hospital, Seattle); Helen Gallagher (Cincinnati General Hospital); Mary Gavin (University of Maryland); Ida Gerding (State University Hospital, Omaha, Nebr.); Anna Gosman (University of Minnesota Hospital); Carrie M. Hall (Peter Bent Brigham Hospital, Boston); Betsy L. Harris (Detroit College of Medicine); Jessica Heal (Rochester General Hospital, Rochester, N. Y.); Ethel A. Holmes (Tulane University Hospital, New Orleans); Edith B. Irwin (University of Pennsylvania Hospital); Elizabeth Jamieson (San Francisco Hospital); L. Eleanor

Keely (Christian Church Hospital, Kansas City, Mo.); Frances M. Kehoe (Youngstown Hospital, Ohio); A. C. MacFarland (Good Samaritan Hospital, Los Angeles); Anna Mack (King's County Hospital, Brooklyn); Florence Martin (City Hospital, Indianapolis); Stella Mathews (Milwaukee County Hospital); Emily A. McLaughlin (Harper Hospital, Detroit); Clara Melville (Jefferson Medical College, Philadelphia); Emma M. Nichols (Boston City Hospital); Sara E. Parsons (Mass. General Hospital); Amy Florence Patmore (N. Y. Postgraduate Hospital); Grace Phelps (University of Oregon Hospital, Portland); Laurie L. Phillips (Buffalo General Hospital); Ruth I. Robertson (Medical College of Virginia); Blanche S. Rulon (University of Pittsburgh Medical School); Louise A. Schleicher (German Hospital, N. Y. City); Julia Catherine Stimson (Washington University Medical School, St. Louis); Amy Trench (Mount Sinai Hospital, N. Y. City); Daisy D. Urch (Northwestern University Medical School, Chicago); Lynnette Vanderwort (St. Luke-Michael Reese Hospital, Chicago); May Vroom (N. Y. Hospital); Mattie Washburn (Albany Hospital).

CHIEF NURSES IN NAVY HOSPITALS. The following were Chief Nurses in Base Hospitals or in Naval Station Hospital Units organized by the American Red Cross for the United States Navy: Grace Anthony (St. Margaret's Hospital, Pittsburgh); Winifred Brown (Philadelphia); Myrtle G. Chandler (San Francisco); Carrie E. Churchill (Grant Hospital, Columbus, Ohio); Sue S. Dauser (Los Angeles); Crecentia Diedericks (Minneapolis); Blanche Fairweather (Seattle); Nell Freund (Seton Infirmary, Austin); Alice Garret (Methodist Hospital, Philadelphia); Helen Grady (St. Mary's Hospital, Brooklyn); M. Olive Graham (Duluth, Minn.); Bernice Hall (Richmond, Va.); C. Elizabeth Hogue (Lane Hospital, San Francisco); Maggie E. House (Houston); Blanche Kennedy (Mountainside Hospital, Montclair, N. J.); Mabel Larson (St. Paul, Minn.); Grace Lieurance (St. Louis); Daisy Mapes (Toledo, Ohio); Grace McIntyre (R. I. Hospital, Providence); Catherine Moran (St. Agnes Hospital, Philadelphia); Sadie Murphy (Minneapolis); Frances Pedersen (Dubuque, Ia.); Emily Pine (Boston); Edna L. Robinson (Seattle); Genevieve Thorpe (St. Louis); Frances Van Ingen (Brooklyn).



DISTRIBUTION OF ARMY NURSES. Upon the signing of the armistice, but prior to demobilization, the Army Nurse Corps (21,480 nurses), not including nurses on final leave or going home for discharge or relief from active service, was distributed as follows: 14 nurses were serving with French forces; 16 were in the Hawaiian Department; 32 in the Philippine Department; 44 in Puerto Rico; 96 were serving in miscellaneous stations such as the Surgeon-General's Office in Washington, and the mobilization station at Hotel Albert in New York; 192 were in debarkation hospitals; 490 were serving in thirty-six aviation stations; 568 were in post hospitals, arsenals, and recruit depots; 742 were with the British forces; 756 in embarkation hospitals; 1,445 were awaiting transportation, on the way to mobilization stations, or under orders to mobilize; 2,431 were in general hospitals; 6,610 were in camp and base hospitals; 8,044 were serving with American Expeditionary Forces.

THE LAST POST. The nurses who returned from their baptism of blood, after their familiarity with death, looked deeper into life. But all did not return. Nurses in war service died all over the country, in camps, on the way to camps, in hospital trains, base hospitals, and general hospitals. Several died in line-of-duty on foreign soil. The war-born pandemic of influenza took the lives of many nurses still in military service. A ship that reaches port with White Caps home from war is a thrilling sight, but always there are some who do not come back. In the first World War, many nurses were cited and decorated, but for others the last decoration was the wooden cross of the soldier for those who gave up their lives like soldiers.

The hundreds of nurses for whom the last bugle played *Go—to—Sleep*, included: Jane Arminda Delano, who fell at her post at Savenay, France, by common consent the outstanding nurse of the war and its most illustrious victim; Helen Fairchild, who worked in a casualty clearing station at the British Front, and died in a base hospital in France; Rose Kaplan, who perished amid the refugees of a hospital in Jerusalem; Ella Maescher, the day of whose death, once heard, will never be forgotten, for it was the day of the Armistice; Grace McBride (1885-1918), whose Bellevue cap fitted like an aureole, who was superintendent of a hospital in Hwang Hien, China, and was conquered by typhus in

western Siberia; Olive Ward Norcross, the first of the American Red Cross dietitians who passed away; Edith May Winchester, who cared for the refugee children at Erivan, Armenia, when typhus was rife, and in the shadow of the scriptural Mount Ararat wrote another name in the martyrology of nursing.

### BETWEEN THE WARS

THE TRAINING CAMP AT BRYN MAWR. At the time of the first World War, the Red Cross and Vassar College sponsored a camp for the training of nurses. The second World War was already raging abroad when the American Red Cross, Bryn Mawr College, Women's Medical College, and the organizations of nurses collaborated in the Red Cross Nurses Training Camp at Bryn Mawr, Pennsylvania (1941). Enrollment was limited to college graduates, who now received an intensive course of three months as preparation for entering nursing schools. This was one of numerous experiments which nurses were making to serve democracy in its greatest crisis. According to eminent imbeciles in various walks of public life, there was no crisis to be averted: America had no enemies, no one had any desire to attack us, and we were safe because we were protected by oceans; moreover, Washington in his Farewell Address had warned us against entangling alliances with foreign countries, and what was happening in Europe was purely a local affair of no concern to us. It is plainly to the credit of the nursing organizations of America that they could smell smoke before the building burned down.

At the opening exercises of the camp, Mrs. August Belmont stated: "We hope that the students we welcome tonight will help to carry even further forward the banners won by their predecessors. The group is also important because it is the first of its kind to face the present emergency." Margaret Conrad (Presbyterian Hospital School of Nursing, N. Y. City), professor of nursing and executive officer of the department of nursing, College of Physicians and Surgeons of New York, and dean of the Red Cross Nurses Training Camp at Bryn Mawr, described the experiment which had been performed with such brief notice, as "a demonstration of twentieth century magic."



ANNIE WARBURTON GOODRICH. Several distinguished educators spoke to the assembled students, but the occasion was made historic by the presence of the woman of whom Lillian Wald had once said: "Whether on platform or in committee or in conference, she inevitably suggests a torch, a spirit afire, and an apparently frail physique emphasizes this flaming attribute as the symbol of her genius. Though she seems to burn steadily she appears never to be consumed." She was Annie Warburton Goodrich, of New Brunswick, New Jersey, who served as superintendent of nursing, New York Postgraduate Hospital, St. Luke's Hospital, and New York Hospital (her alma mater, 1892); general superintendent, Training School for Nurses, Bellevue and Allied Hospitals; inspector of Nurses Training Schools, New York State Education department; director of nursing, Henry Street Visiting Nurse Service; president, National League of Nursing Education, American Federation of Nurses, American Nurses Association, Association of Collegiate Schools of Nursing; first dean of the Army School of Nursing (1918), and crowned her academic career, rich in medals, awards and honorary degrees, as founder and first dean of Yale University School of Nursing (1923).

THE SPIRIT OF NURSING. When Miss Goodrich appeared at the training camp at Bryn Mawr, she was a wisp of a woman, past her seventy-fifth birthday. Fragile, wrinkled, little, she had been chosen as the nurse to represent all the nurses of America. The dean emerita did not speak of herself, but placed a wreath on the brow of Miss Nutting, a nurse older than herself, and America's foremost living pioneer of nursing education. Then Miss Goodrich told these beginners her conception of nursing:

Nursing is not concerned only with national defense; it is part of an international health movement, the movement best calculated to wipe out differences of race, creed, and color. The good nurse must be technically expert, scientifically informed, socially experienced. Nursing is the connecting link between the findings of science and the people, so nursing must speak with the language of science and the language of the people. If we want to save democracy there must be some who can go into every home, every place, and preach the brotherhood of man.

There is nothing in the entire history of nursing which better expresses the spirit of nursing.

## SECOND WORLD WAR

MARY M. ROBERTS. A graduate of the Jewish Hospital of Cincinnati, assistant superintendent of nurses in her alma mater, and superintendent of nurses in the Savannah Hospital, president of the Ohio State Association of Graduate Nurses and a member of the State Board of Nurse Examiners, Mary M. Roberts served in the first World War as director of the Lake division of the Red Cross (Ohio, Indiana, Kentucky), chief nurse on cantonment duty, and chief nurse at Camp Sherman. Miss Roberts succeeded Miss Palmer as editor of the *American Journal of Nursing*, and proved to be entirely worthy of the fallen leader. Miss Roberts, experienced in the first World War, remained at the helm of the *Journal* in the second World War. Aside from making its pages indispensable for future historians as source-material of the nursing aspects of the war, she helped in the mobilization of the nurses of America, chronicled their achievements month by month, and by her probity and competence did much, in the words of the *Journal*, "to increase the nurse power of the nation."

AMERICAN JOURNAL OF NURSING. The December 1941 issue of the *American Journal of Nursing* carried "A Merry Christmas" on its green front cover, and "A Merry Christmas and all Good Wishes for the New Year" on its back cover, for it had been printed while Japan was lulling America to slumber with the opium dreams of peace talks, and completing her operations for the massacre at Pearl Harbor. The issue of January 1942, opening with the editorial, A State of War Exists, carried messages by Mary Beard, director of Red Cross Nursing Service; Julia O. Flikke, superintendent of Army Nurse Corps; and Sue S. Dauser, superintendent of Navy Nurse Corps. Subsequent editorials (up to December 1943) were entitled: Nursing Education in Wartime; Nursing for Victory; Nurses in the Headlines; Symbols of Service; The Time is Now; Private Duty Nursing in Wartime; Nursing Councils for War Service; (1943), A Stern and Terrible Year; Our Profession ("At no time in the history of the nursing profession has nursing organization been so important as it is to-day."); Tributes, Civilian and Military ("Of all occupations open to women that of Army nurse gives them



greatest opportunity to express the true soul of womanhood."); The Bolton Bill; Procurement and Assignment Service; A National Registration ("The immediate purpose of this registration is to get on with the war by making the wisest possible use of the nation's nurse power.").

**THE CALL FOR NURSES.** Nurses from all over the nation joined the colors and put on the uniform of Uncle Sam. For the first time the militarized women of America achieved full rank: every nurse was a commissioned officer. Nurses who had not nursed for years ("hidden nurses"), too old in their sixties and seventies for the armed services, came out of their homes and took all sorts of jobs, in hospitals and in industrial plants, that younger feet might march to war. The frantic appeal for thousands of nurses, and for still more thousands, was answered by nurses of every social stratum, and by representatives of every race and creed whose blood makes up the mighty lifestream of America. Nurses and student nurses of Japanese descent naturally felt the same as the others. Faced with racial bias, indignation drove one of these student nurses, who knew no country except the United States, to an exclamation that deserves immortality: "I am an American of Japanese ancestry and one cannot choose one's ancestors." All races have contributed to the building of America, and racial discrimination is treason to the idea of America: the nurses of America ministered to the sick without the quota system.

**NURSES OF SECOND WORLD WAR.** Out of thousands who should be named, who worked either in administrative posts, or on foreign shores or seas, or in the air beneath alien skies, the following were representative of the nurses of America: (1) Margaret Aaron (Legion of Merit), director of nursing service, Army Nurse Corps, in the European Theater of Operations; (2) Gwen H. Andrew, superintendent of nurses, U. S. Veterans Administration; (3) Margaret Arnstein, consultant in education, N. Y. State Department of Health, who became head (1941) of the unit of the U. S. Public Health Service for the preparation of nurses for national defense; (4) Gertrude Banfield, chairman, Committee on Army and Navy Nursing, Office of Defense Health and Welfare Services; (5) Mary Beard, first chairman of the official subcommittee on nursing, Health and Medical Committee; (6) Serene J. Berg (New England

Deaconess Hospital School of Nursing, Boston), chief nurse of the Army's first overseas hospital train; (7) Florence A. Blanchfield, superintendent of Army Nurse Corps; (8) Vivian Olson Bradshaw, who as head nurse of New York City Blood Donor Center revived American soldiers on remote shores; (9) Mary Jane Brown, the Navy nurse who served in New Zealand and the New Hebrides; (10) Helena Clearwater (Legion of Merit), who was at Pearl Harbor on the fatal Sabbath of the eternal infamy of Japan; (11) Jane Clement, director of the Army Nurse Corps in the Southwest Pacific Area; (12) Nellie V. Close, director of nursing service, Army Air Corps; (13) Ruth Mollie Cohen, whose performance of duty under fire was regarded as outstanding as a nurse on the U.S.S. *Solace* during the surprise attack on Pearl Harbor; (14) Monica E. Conter, who was stationed at Hickam Field when Japanese lips smiled peace and Japanese bombs spilled American blood on Hawaiian soil; (15) Cordelia E. Cook, who served in Sicily and landed with the first troops in Italy, wounded by artillery fire and continued her duties, the first nurse in the war to receive the Purple Heart and the Bronze Star; (16) Phyllis Mae Daley (Lincoln Hospital School of Nursing, N. Y. City), the first Negro nurse to be commissioned in the Navy; (17) Sue S. Dauser, superintendent of Navy Nurse Corps; (18) Dorothy Davis (Presbyterian Hospital School of Nursing, N. Y. City, 1940), a recent graduate who held on to her diploma during the twenty-one months in which she nursed her fellow-prisoners in the Santo Tomas Internment Camp at Manila; (19) Maude Davison, in command of nursing services at Bataan and Corregidor, who continued her work as a nurse in a Japanese prison-camp until released by MacArthur's returning troops; (20) Ann C. Deeds, stationed in Australia, who scrubbed and scolded the Marines, and gave them pills and filled out their hollows with gallons of milk; (21) Dorothy Deming, whose sermon, "Fearless Eyes," was a plea for the rational treatment of the men who return from battle without eyes; (22) Katharine J. Densford, president of the American Nurses Association, who helped mobilize the nurses of the nation; (23) Kathleen R. Dial (Distinguished Flying Cross, Air Medal, Purple Heart), nurse-heroine of a crash landing in Guinea, who attended to her eighteen patients before she collapsed; (24) Alta Dines, chairman of the advisory committee to the director of the American Red Cross Nursing Service; (25) Doris Dono-



van, chief nurse of an evacuation hospital, who followed closely in the track of Patton in his rampage across Germany; (26) Mary Lillian Downen, who brought touches of home to many lonely boys in the forlorn Aleutians; (27) Virginia M. Dunbar, director (1944) of American Red Cross Nursing Service; (28) Mary J. Dunn (House of Mercy School of Nursing, Pittsfield, Mass.), director of nursing Education Unit, U. S. Public Health Service; (29) Jeanne Anne Elder, Navy nurse who served at Guadalcanal, and in a beauty contest held by marines was chosen Miss Guadalcanal; (30) Katherine Faville, chairman of the Committee on Recruitment, National Nursing Council; (31) Louise M. Fitzgerald, who was indispensable in the Persian Gulf Command; (32) Julia O. Flikke, who when superintendent of the Army Nurse Corps rose to the rank of colonel, thus being the first woman to become a commissioned officer in the United States Army, as prior to that time Army nurses held relative rank only (from second lieutenant to major); (33) Virginia Ford, public health nurse to the Liberia Mission; (34) Nola G. Forrest, chief nurse of United States Army Nurse Corps in the Southwest Pacific, who directed the nursing of battle casualties in the midst of Japanese bombings; (35) Annie G. Fox (Purple Heart), Army nurse who directed the civilian volunteer nurses, assisted in dressing the wounded, and continued to administer anesthesia during the heaviest bombardment at Station Hospital, Hickam Field, Hawaii, on the never-to-be-forgotten date of December 7, 1941; (36) Susan E. Freeman, who arrived in North Africa as chief nurse of the first unit of army Negro nurses assigned to foreign service; (37) Bessie Fullbright, chief nurse of the remarkable group of North Carolina nurses in Africa, enshrined in Ernie Pyle's *Here Is Your War*; (38) Ruth M. Gardiner (White Haven Sanatorium School of Nursing, Pa.), an air evacuation nurse in Alaska until killed in a plane crash, the nurse for whom the Army named a general hospital; (39) Ella Gimmetstad (Presbyterian Hospital School of Nursing, Chicago), the capable and comely director of Nursing Disaster Service, American Red Cross; (40) Stella Goostray, director of Children's Hospital School of Nursing of Boston, and head of the National Nursing Council for War Service; (41) Ruth Grancelle, chief nurse of the American Hospital in Paris after the liberation of France; (42) the attractive Eunice Hatchitt, of Ransanky, Tex., who lived through an ordeal which comes to few women, and wept only when ordered to escape and leave

her wounded patients at Bataan; (43) Alma C. Haupt, executive secretary, subcommittee on nursing, Health and Medical Committee appointed by President Roosevelt to advise the government; (44) Nellie X. Hawkinson, chairman of the Committee on Educational Problems in Wartime; (45) Mary Martha Heck (Bronze Star), Navy nurse who remained in the shock-room of a hospital in the south of England, administering oxygen, plasma, whole blood, and sulfa compound to the invasion casualties under the weird music of repeated bombings; (46) Alvira A. Hilger, the first Army nurse who flew over the Himalayas to China; (47) Leona Idzikowski, flight nurse, who soared from a Sicilian airfield over the Tyrrhenian Sea to Italy to bring back a cargo of soldiers wounded only a few minutes previously; (48) Leona Jackson, Navy nurse who was on duty at Guam when captured by the Japanese, and after repatriation and rehabilitation fulfilled her desire to return to the liberated island ("We will never have cause to complain that we are not busy. This is nursing! There is tremendous need for native health and welfare work"); (49) Lillian Kelly, who brought the skilled hands of an army nurse to the fighting men of China; (50) Jane Kendleigh, who learned to seek foxholes under mortar fire, the first Navy nurse to fly to the battlefield in Iwo to carry off the wounded by plane; (51) Stephany Kozak (Yale University School of Nursing), who directed, in Rio de Janeiro, the course in air-evacuation for nurses of the Brazilian Air Force; (52) Grace B. Lally, chief nurse of U.S.S. *Solace* as it lay peacefully at anchor in Pearl Harbor, who sprang into action when the first victims of Japanese treachery were carried on board; (53) Maxime Lerch, who visited far-off coast towns and bases as a young pioneer of nursing in the Merchant Marine; (54) Mary Lohr, who showed ingenuity as well as heroism in the Philippines where she had charge of a surgical ward in the blackout with 292 patients and scant equipment; (55) Aleda E. Lutz, who flew to evacuate the wounded from battle areas over 190 times before she was killed in southern France, after whom was named the largest hospital ship afloat; (56) Alison MacBride, regional public health nursing consultant, United Nations Relief and Rehabilitation Administration; (57) Florence MacDonald, the nurse unruffled in the midst of the hottest fire of Bataan and Corregidor; (58) Jessie MacFarlane, superintendent of nurses, U. S. Public Health Service; (59) Edna Louise Mahar, director of Nursing Service in the South



Pacific Area; (60) Dortha Malchow (Bronze Star), who served faithfully in India, and performed her duty in the combat zone; (61) Agnes Maley, who served in the Philippines, and became director of the Army Nurse Corps in the Burma-India area; (62) Eleanor Malin, who nursed wounded soldiers in the tent wards of Dutch New Guinea; (63) Ann Manning, flight nurse, who during a terrifying tropical storm coolly and devotedly attended to the wounded men in her plane; (64) Pearl McIver, chief, Office of Public Health Nursing, U. S. Public Health Service; (65) Rita Miller, consultant on Negro nurse education, Division of Nurse Education, U. S. Public Health Service; (66) Josephine Nesbit, veteran of the first World War who won the praise of MacArthur after the first attack on the Philippines in the second World War; (67) Hilda Nevin, Army nurse stationed at a shuttle bomber-base in Russia; (68) Mary Ellen O'Connor, who was placed in charge of the first flight nurses of the Navy Nurse Corps; (69) Elsie S. Ott, who nursed the wounded in the African desert, and took such exceptional care of sick men in the India-to-America flight that she received the first Air Medal ever awarded a member of her sex; (70) Jessie Paddock (Legion of Merit), who served on the Anzio beachhead, and when the boys marched to Rome; (71) Vincoe M. Paxton, Army nurse who crossed the Belgian border into the darkness of Germany, and became part of life-saving work in a group of tents that made up the field hospital; (72) Lucile Petry, first dean of Cornell University-New York Hospital School of Nursing, and first director of U. S. Cadet Nurse Corps; (73) Mary Louise Petty, chief nurse of the first group of Negro nurses assigned to the European Theater of Operations; (74) Marian Randall, chairman, Committee on the National Survey of Registered Nurses, Office of Defense Health and Welfare Services; (75) Juanita Redmond (Columbia, S. Car.), whose stirring report, *I Served on Bataan*, is an imperishable fragment of military nursing; (76) Georgia Reynolds, who helped demonstrate the wonders of plasma, the sulfa drugs, and penicillin, when within a few hours five hundred fresh casualties were received on a Navy Hospital ship; (77) Dorothy Rice (Air Medal), who often flew over the Southwest Pacific in troop-carrier planes, nursing the sick and wounded of battle areas and jungles on their way to hospitals; (78) Estelle Massey Riddle, consultant, Co-ordinating Committee on Negro Nursing, National Nursing Council for War Service; (79) Margaret

Riley, chief nurse of Army hospitals in Iceland; (80) Mabel Robertson, of the Army School of Nursing of Walter Reed Hospital, who fled to the hills and hid in caves and native nipa huts when the Philippines fell, and, after escape by submarine and rehabilitation in Australia, came back when MacArthur returned; (81) Elsie E. Schneider, director of Nursing Service in the Hawaiian Sector; (82) Helen G. Schwarz, director of Field Service, National Nursing Council for War Service; (83) Catherine Shaw, whose numerous ribbons were service ribbons, for she was a Navy nurse in the mental ward of the hospital ship (U.S.S. *Solace*) in the island-dotted waters of the Coral Sea; (84) Blanche F. Sigman, who led her unit on the Anzio beachhead, and was killed at the bedside of a patient to whom she had just finished giving life-saving plasma (a hospital ship was named *Lieutenant Blanche F. Sigman*); (85) Frances Slanger, who sat in her rain-lashed, wind-blown tent ("Our GI drawers are at this moment doing the dance of the pants"), writing by flashlight an appreciation of the American soldier for *Stars and Stripes* ("a great distinction to see you open your eyes and with that swell American grin, say, 'Hi-ya, babel!'",), and was killed that same night by a German shell; (86) Rose M. Smith, flight nurse, who helped the helpless when bases were abandoned in eastern China; (87) Eugenia K. Spalding, consultant in nursing education, States Relations Division, U. S. Public Health Service; (88) Julia Catherine Stimson, who was recalled to active service, for she was too valuable to her country to be permitted to remain on the sidelines; (89) Leora Stroup, a pioneer of aero-medical nursing, the first aviatrix-nurse to teach air evacuation; (90) Bernie Manning Sullivan, flight nurse of the China-Burma-India fighting front, who flew frequently over enemy-held jungles to evacuate sick and wounded Americans, Australians, British, Chinese, and Indian Gurkhas; (91) Mary Ann Sullivan (Legion of Merit), who nursed wounded Marines on the torpedoed *Maasdam*, and managed an operating room in Commando Truck during bombing, entirely fearless under fire; (92) Hazel Thomason, who supervised an operating room in a London hospital amid the unpredictable buzz bombs and V-2 rockets; (93) Gertrude L. Thompson, chief nurse, Walter Reed Hospital; (94) Mary Towse, chosen as representative of all the Navy nurses who served in the Philippines; (95) Ada Lee Tschoerner,



nurse from Texas, who took care of injured German Army nurses captured in the siege of Brest; (96) Katherine Tucker, chairman of the Committee on Supply and Distribution, National Nursing Council for War Service; (97) Faye E. White (Allegheny General Hospital, Pittsburgh), the first Navy nurse to receive the Bronze Star Medal for exceptional services, as chief nurse of a fleet hospital in the South Pacific; (98) Elmira Wickenden, executive secretary, Nursing Council for National Defense, which became the National Nursing Council for War Service; (99) Bernice M. Wilbur (Legion of Merit), director of Nursing Service in the North African Theater of Operations; (100) Mary Williams, president of Nurses Association, Territory of Hawaii, who carried on valiantly in the unforgettable attack on Pearl Harbor.

### PLEDGES OF MILITARY NURSES

The nurses of America who went to war were true to their splendid affirmations. No nuns in medieval convents took nobler vows for the sake of God. In the pledge of the Army nurse, the Cadet nurse, and the Flight nurse, God is omitted, for the Almighty is never in need of nurses. The pledge is taken for the sake of the American soldier, which is really more sensible:

PLEDGE OF THE ARMY NURSE. *As an Army nurse, I accept the responsibilities of an officer in the Army Nurse Corps. I shall give faithful care to the men who fight for the freedom of this Country and to the women who stand behind them. I shall bring to the American soldier, wherever he may be, the best of my knowledge and professional skill. I shall approach him cheerfully at all times under any conditions I may find. I shall endeavor to maintain the highest nursing standards possible in the performance of my duties. I shall appear fearless in the presence of danger and quiet the fears of others to the best of my ability. My only criticism shall be constructive. The reputation and good name of the Army Nurse Corps and of the nursing profession shall be uppermost in my thoughts, second only to the care of my patients. I shall endeavor to be a credit to my Country and to the uniform I wear.*

PLEDGE OF THE CADET NURSE. *I am solemnly aware of the obligations I assume toward my country and toward my chosen profession. I will follow faithfully the teachings of my instructors and the guidance of the physicians with whom I work. I will hold my body strong, my mind alert, and my heart steadfast. I will be kind, tolerant, and understanding. Above all, I will dedicate myself now and forever to the triumph of life over death. As a Cadet Nurse, I pledge to my country my service in essential nursing for the duration of the war.*

PLEDGE OF THE FLIGHT NURSE. *I will summon every resource to prevent the triumph of death over life. I will stand guard over the medicines and equipment entrusted to my care and ensure their proper use. I will be untiring in the performance of my duties, and I will remember that upon my disposition and spirit will in large measure depend the morale of my patients. I will be faithful to my training and to the wisdom handed down to me by those who have gone before me. I have taken a nurse's oath reverent in man's mind because of the spirit and work of its creator, Florence Nightingale. She, I remember, was called the lady with the lamp. It is now my privilege to lift this lamp of hope and faith and courage in my profession to heights not known by her in her time. Together with the help of flight surgeons and surgical technicians I can set the very skies ablaze with life and promise for the sick, injured, and wounded who are my sacred charges. This I will do. I will not falter. In war or in peace.*

## THE VERDICT

It took the second World War to bring the American nurse to her national stature. Serving in embattled lands whose names the public had never heard before, in hospital ships on all the seas, and in air ambulances evacuating the wounded by plane, the nurse came into her own as comforter and healer. Femininity in foxholes, with mud-caked khaki coveralls over pink panties, captured the imagination of the public and the fighting men of America. Plasma and penicillin are indispensable when sickness comes, but a pat on the back and the smile of female lips are also needed. An infantryman, badly wounded, asked



his nurse in the combat zone, "How can you nurses be so cheerful here?" The nurse thought, "Men like you, soldier, you're the reason. No Army nurse could look you in the eye if she couldn't take it, just the way you do." The value of the nurse is inherent in the unique circumstance that her acquisition of the latest technical knowledge does not diminish her womanliness.

## XVII

### Nursing: Survey and Statistics



Biology made the female the nurse of the species. The first mother who leaned over the first cradle of leaves in the primitive forest was the first nurse—and back of this fat-hipped woman with the hanging breasts, the projecting face, and the heavy eyebrow ridges, stretched countless ages of her prehuman ancestry. In the purposeful efforts of animals to aid their young and injured are found the rudiments of medicine and nursing. The utter helplessness of the human infant, even after he has mastered the difficult art of holding his overgrown head erect, developed a prolonged connection between mother and child. Before the dawn of agriculture, the male stepped out of his cave or rock-shelter, club in hand, the hunter of all living things; the female remained behind, the nurse of the young and the sick.

In the mortuary art of antiquity, the tomb of Cleita bore an elegy ascribed to the father of pastoral poetry (Theocritus, *Inscriptions* xx): “This memorial the little Medeios hath builded by the wayside to his Thracian nurse, and written her name upon it, Cleita. She hath her reward for the child’s good upbringing, and what is it? to be called a good servant evermore.” This simple inscription sums up the status of the slave nurse of antiquity: her sole function was to be a good servant. The Hellenic system of instructions, based on male supremacy, precluded the technical training of nurses. Education was open to the entertaining women or courtesans (*hetairai*) who were outside the family circle, but education was denied to the mothers and daughters of the household: it was the greatest mistake the Greeks made. That ancient error has persisted until recent times.

The letter which Paul wrote at Corinth (A.D. 60), and Phoebe of Cenchreae brought to Rome, introduces this devoted woman (Romans



16:1-2): "I commend unto you Phoebe our sister, which is a servant [*diakonos*] of the church which is at Cenchreae: That ye receive her in the Lord, as becometh saints, and that ye assist her in whatsoever business she hath need of you: for she hath been a succourer of many, and of myself also." There is no other Pauline reference to Phoebe, but as *diakonos* (deaconess) signified an ordained woman whose duties included service to the distressed and the sick, Phoebe is regarded as the earliest of the deaconesses and the first visiting nurse.

The withdrawal of Roman troops from Britain (407), the capture of the Eternal City by Alaric's wild Germans (410), and the grass-destroying journey across Italy (452) by Attila, king of the Huns, presaged the sack of Rome (455) by the Vandal monarch, Gaiseric, whose captives included the Empress Eudoxia, and whose booty was the wealth of the world which Rome had plundered. The barbarian leader transferred his spoil to the capital of his kingdom in Africa, to the very city of Carthage which Rome had wiped off the map. Centuries before, Scipio had leveled the city to the earth, burned it and salted it and cursed it, but a strange melancholy mingled with his victory. The youthful conqueror of Carthage, standing amid the ashes with his Greek friend, Polybius the historian, recited the Homeric verse which foreshadowed the end of empires: "And see thy warriors fall, thy glories end"—might not this prophecy be applied to Rome some day? History is not in haste, and waited long before fulfilling the foreboding of Scipio: the dead city of Carthage, stealing the stolen riches of Rome, revived in vengeance in the fifth century. Then came the debacle: the fall of the western Roman Empire (476), the last emperor adding to the ignominy by bearing the names of Romulus Augustulus. The chief nursing interest of this confused age was the development of Christian monasticism, which had been established in the preceding century.

The hospital is a house of mercy, but to believe that hospitals have been sponsored for merciful reasons exclusively, is to be guilty of credulity. Even the king-loving English admit that King John (1167-1216) was a pitiless and worthless scoundrel, yet with his bloody hands he gave St. Bartholomew's Hospital a charter for the love of God and the welfare of his soul. Innocent III (1161-1216), who founded the Hospital of the Holy Spirit at Rome, denounced Philip Augustus for permitting his Jewish subjects to employ Christian nurses, and popu-

larized death as the penalty for heresy: the same pope was the chief architect of Hospitals and of the Inquisition. The conqueror of Mexico was notorious for treachery and cruelty, yet on the spot where he first met the doomed Montezuma, Hernando Cortes (1485-1547) erected the first hospital in the New World (Hospital of the Immaculate Conception, 1524).

All new countries suffer from a lack of nurses. One of the best-known passages in American history is William Bradford's description of the first winter of the *Mayflower* Pilgrims at Plymouth (1620-21):

Of all the hundred odd persons, scarcely fifty remained, and sometimes two or three persons died in a day. In the time of worst distress, there were but six or seven sound persons, who, to their great commendation be it spoken, spared no pains night or day, but with great toll and at the risk of their own health, fetched wood, made fires, prepared food for the sick, made their beds, washed their infected clothes, dressed and undressed them; in a word did all the homely and necessary services for them which dainty and queasy stomachs cannot endure to hear mentioned; and all this they did willingly and cheerfully, without the least grudging, showing their love to the friends and brethren; a rare example, and worthy to be remembered.

Bradford specifies William Brewster and Myles Standish by name for their unremitting attention to the sick and infected. Not a single woman is mentioned as helping with the nursing. What was young Priscilla Mullins doing? As the sole survivor of her family—her father, mother, brother, and the family servant perished in the first sickness of the Colony—she was probably not in a condition to render aid.

The diary which Elizabeth Sandwith Drinker kept so faithfully for forty-nine years (1758-1807), is a graphic survey of health and disease in Colonial and post-Colonial Philadelphia. The Drinkers were a prominent and prosperous Quaker family, and such frequent entries as "Dr. Rush called," and "Dr. Kuhn called," attest their employment of the leading practitioners of the period. A passage in the diary in which Shippen is mentioned, reveals that it was easier to obtain the services of a famous physician than of a satisfactory nurse:

April 5 [1795]: I came to Jacob Downings after tea, found Sally complaining, she has pains, which probably, will not go off 'till worse comes on, we have sent D<sup>r</sup> S. word that she is unwell, Sister has been out again this even<sup>g</sup> looking for a Nurse, but has not yet found one to our mind, poor Sally is gone to bed, but I fear not to sleep, I am going to do the same in a back room with Eliza:—rain this even<sup>g</sup> with thunder & lightening.



In unraveling the development of any science, we unwind the first uncertain strands in Egypt and Babylon, proceed properly to Greece, slacken our pace among the Byzantines, lose the thread in the twilight of medievalism, then pick up the long-broken skein in the Renaissance and carry it forward to the present day. This rule, true for medicine, does not apply to nursing. There was no trained nursing in ancient Greece, and the nursing movement arose in medievalism, though as penance and not as a profession for the cure of the sick; with the Renaissance began the degradation of nursing, which entered into its dark ages after medicine had emerged into the light of the experimental method. Technically, nursing was not farther advanced in 1800 than in 800; and in Protestant countries nursing was outside the realm of respectability.

Since medicine and nursing now march abreast, it is often assumed that in their evolution they followed parallel courses of development. Here we have a striking example of how dangerous it is to write history by intuition instead of investigation. Rational medicine originated in the Periclean Age with the Hippocratic physicians, but it was medicine without nursing. In medievalism, when the medicine of antiquity ceased to function, the nursing movement arose under the impetus of religion, but it was nursing without medicine. The renaissance of medicine (16th cent.) was the beginning of the dark ages of nursing. The period of the trained nurse, in which nursing became a profession working with medicine, dates from the latter half of the nineteenth century, while the period of self-organization and state registration of nurses belongs to the twentieth century.

This situation may be expressed in still another way: until the mid-nineteenth century the history of nursing can be studied without any reference to the history of medicine, for there was no relation between them. Textbooks on nursing history like to mention famous medical names, but there is no reason for it. The publication of the *Fabrica* (1543) was the foundation of modern anatomy, but no nurse of that age heard the name of Vesalius; the publication of *De motu cordis* (1628) was the modernization of physiology, but not a single nurse in the seventeenth century changed her methods or her bandages because Harvey had demonstrated the circulation of the blood. After centuries of divergence, doctor and nurse move toward the common goal of

preventive sickness and public health, but the history of nursing is not to be studied as part of the history of medicine, for nursing is not the offspring of medicine.

As the youthful nurses of today light their candles in the flame of Florence Nightingale's lamp, behind their white caps hover the wraiths of a never-ending procession: the primitive mother nurses; the women who gathered herbs and brewed healing potions; the navel-cutters and wound-dressers; the household nurses of antiquity; the attendants of the sick and wounded in the Broin Bearg (House of Sorrow), which the Irish princess, Macha of the golden hair, founded in the palace of Emania (300 B.C.). In the Christian era, Phoebe, the first visiting nurse, begins the procession of deaconesses who succored the sick. Fabiola, serving as nurse in the hospital she established in Rome, is followed by a royal line of abbesses and nursing saints. In the name of Christ come the Augustinian Sisters; the Sisterhood of St. John; the Sisterhood of St. Lazarus; the Tertiaries of St. Francis; the Poor Clares; the bandage-loving Beguines of Flanders; the Sisterhood of the Common Life; the Oblates of Florence. From the seventeenth century comes the young shepherdess, Marguerite Nazeau, the first Sister of Charity of St. Vincent de Paul, tutored by Louise de Marillac, and in their footsteps, free from the coercion of the cloister, walk the most zealous of nurses, foreshadowing the hospital nursing and the social work of modern times. Alas, in the procession we cannot escape the squalid but substantial figures of the drunken pauper nurses of England, who remain long on the scene, and slowly recede under the accusing gaze of the reformer of nursing.

Florence Nightingale was a young lady, twenty-four years of age, when Charles Dickens (*Martin Chuzzlewit*, 1844) horrified his readers by his exposure of the private-duty nurse (Sairey Gamp) and the hospital nurse (Betsey Prig) of that time. Ten years later, in the shame of Scutari (Crimean War, 1854), modern nursing was born. It was Florence Nightingale alone who created it. Few in that first group of nurses who walked with her up the hill to the Barrack Hospital caught a glimpse of her vision; the second group, under the mischievous Mary Stanley, was controlled by Cardinal Manning, and added considerably to Miss Nightingale's hardships. Other forces contributed to the final result, but the history of nursing is definitely divided into two epochs: before Florence Nightingale and after Florence Nightingale. Perhaps the



strangest aspect of her revolution is that Miss Nightingale founded modern nursing while retaining a low estimate of the mental capacity of the female sex.

Woman suffrage was wolfsbane to Queen Victoria; a reference to the emancipation of woman made her abusive. The Queen wrote of

this mad, wicked folly of Woman's Rights, with all its attendant horrors. Lady — ought to get a *good whipping*. It is a subject which makes the Queen so furious she cannot contain herself. Tennyson has some beautiful lines on the difference of men and women in *The Princess*. Woman would become the most hateful, heartless, and disgusting of human beings were she allowed to unsex herself; and where would be the protection which man was intended to give the weaker sex? The Queen is sure that Mrs. Martin agrees with her.

Florence Nightingale was equally violent in her opposition to the self-organization and the state registration of nurses. The Mrs. Martins of the world undoubtedly agreed with the Queen of England and with the Queen of Nurses, but progress was made because there were rebels who marched ahead of the accepted procession.

In the year in which Samuel David Gross gave his pioneer report on the training of nurses to the New Orleans meeting of the American Medical Association, Rudolf Virchow, founder of cellular pathology in medicine and opponent of Bismarck in politics, was invited to address a conference of women's clubs in Berlin (Nov. 6, 1869) on "Professional Education in Nursing, Also Outside Church Organizations." It was the word "also," which was of special interest to Virchow; it was of so much interest that he wished he could eliminate "also" entirely, for he did not want to discuss the manner in which churches organize nursing. He explained that nursing organizations formed by the church, though ostensibly interested in nursing, were actually serving another purpose which had nothing to do with nursing. His lecture was a remarkable plea for trained nursing under civic and municipal auspices, free from ecclesiastical control. Virchow concluded by offering to his audience the following resolutions for the secularization of nursing:

1. It is desirable that women nurses be permitted to work in men's section in public hospitals.

2. Every large hospital shall have a school for training of male and female nurses and such a school shall have practical as well as theoretical scope. The support of such schools should be the duty of the municipality, district or government.

3. In every larger circle in every larger city and every smaller state, societies should be organized whose task will be to collect money for the training of male and female nurses and for subsequent support of such persons and their fellowships, as well as of the patient himself.

4. Whenever possible, working male and female nurses should form a nucleus for founding a fellowship of nurses whose duty would be to support and maintain unemployed nurses and pension invalided nursing personnel, as well as to further education. Here a decision must be made whether such contributions are to be collected from the members by the fellowship or whether they are to be drawn from a common treasury.

5. It is most desirable that the fundamentals of physiology and the care of health (dietetics and hygiene) be taught in teachers' seminars and in public schools, also during the course in natural history, as a general knowledge of the human body should be available to pupils.

The nursing organizations of our country include the American Association of Industrial Nurses, American Nurses Association, American Red Cross Nursing Service, Association of Collegiate Schools of Nursing, Hadassah (Women's Zionist Organization of America), Harmon Association for the Advancement of Nursing, National Association of Colored Graduate Nurses, National Association of Nurse Anesthetists, National League of Nursing Education, National Nursing Council, National Organization for Public Health Nursing. In addition to military and federal services, state, territorial, local, and alumnae associations, including numerous registries, have amply demonstrated the organizational capacities of nurses.

After North Carolina, which was the first, every state in the Union, including Nevada (which has no schools of nursing), and the territories of Alaska, Hawaii, and Puerto Rico, now make it mandatory for the nurse to pass an examination before she is permitted to practice. The enactment of licensure in the states was as follows:

Alabama (1915), Arizona (1921), Arkansas (1913), California (1913), Colorado (1905), Connecticut (1905), Delaware (1909), District of Columbia (1907), Florida (1913), Georgia (1907), Idaho (1911), Illinois (1907), Indiana (1905), Iowa (1907), Kansas (1913), Kentucky (1914), Louisiana (1912), Maine (1915), Maryland (1904), Massachusetts (1910), Michigan (1909), Minnesota (1907), Mississippi (1914), Missouri (1909), Montana (1913), Nebraska (1909), Nevada (1923), New Hampshire (1907), New Jersey (1903), New Mexico (1923), New York (1903), North Carolina (1903), North Dakota (1915), Ohio (1915), Oklahoma (1909), Oregon (1911), Pennsylvania (1909), Rhode Island (1912),



South Carolina (1910), South Dakota (1917), Tennessee (1911), Texas (1907), Utah (1918), Vermont (1911), Virginia (1903), Washington (1909), West Virginia (1907), Wisconsin (1911), Wyoming (1909).

Prior to the second World War, the number of state-registered nurses in foreign countries was as follows (the figures in parentheses indicate the total population): Austria (6,755,507) 4,140; Belgium (8,500,000) 3,205; Bulgaria (6,090,215) 502; Canada (10,500,000) 17,700; China (466,785,856) 3,009; Denmark (3,706,349) 12,000; Estonia (1,126,413) 552; Finland (3,762,026) 5,000; France (39,209,518) 48,000; Germany (60,030,000) 37,396; Great Britain (39,952,377) 85,895; Greece (6,480,000) 210; Holland (8,150,000) 20,000; Iceland (15,000) 121; India (350,000,000) 897; Irish Free State (3,500,000) 6,000; Japan (97,694,000) 116,000; Latvia (1,950,502) 728; Lithuania (2,400,000) 298; New Zealand (1,560,000) 7,250; Norway (2,895,000) 4,250; Philippines (14,000,000) 4,131; Poland (32,132,936) 1,324; Rumania (19,319,330) 537; Siam (13,000,000) 721; South Africa (9,529,353) 4,388; Sweden (6,266,888) 8,000; Yugoslavia (15,280,000) 570.

For centuries it was the duty of the nurse to help those who had fallen ill. Her labor was limited to the bedside of the invalid. About a generation ago, the frontiers of nursing were extended: to curative nursing was added the wider realm of preventive nursing. The implications of the new nursing were recognized (1916) by the nestor of American medicine, William Henry Welch (1850-1934):

The field of work of the trained nurse has broadened to such an extent in some directions that the term nurse is no longer, strictly speaking, applicable to a good deal of the work, particularly public health work and some of the work of the visiting nurse. I would not suggest for a moment a change in the term nurse, with which so many beautiful associations are connected, but would simply indicate that the work has gone far beyond the field of merely caring for the sick.

At the dawn of the twentieth century, trained nursing in America appeared to be well established, yet the increase of nurses in the subsequent decades reveals the development of the profession: in 1900, there was one nurse per 708; in 1930, one nurse per 416; and in 1940, the ratio of nurses to population was one nurse for every 357 persons. The figures are gratifying, but they hide a national tragedy: some families are able to keep trained nurses at their bedsides, day and night, and take them

on journeys as traveling companions; other families, by straining their finances, manage to employ a trained nurse in a crisis; but many families, who have not learned the delicate art of accepting charity, never see a trained nurse except on a poster. It is not surprising if a sensitive stethoscope, applied to the heart of humanity, can hear the murmuring of socialized nursing.

The recent Census (1940) revealed the sexual differentiation in professional groups: of 180,483 lawyers and judges, 4,447 were women (2.5 per cent); of 165,629 physicians and surgeons, 7,708 were women (4.7 per cent); of 110,369 social, welfare, and religious workers, 74,423 were women (67.4 per cent); of 1,076,001 teachers, 806,860 were women (75.0 per cent); of 371,066 nurses, 362,897 were women (97.7 per cent). In the annals of ancient India are found the earliest references to professional nurses: "The Physician, the Drugs, the Nurse, and the Patient constitute an aggregate of four. Of what virtues each of these should be possessed, so as to become causes for the cure of disease, should be known." The four qualifications of the attending nurse were stated: knowledge of the preparing or compounding of drugs for administration; general cleverness; devotedness to the patient; and purity of mind and body. These nurses were males, and ages passed before such qualifications were expected from the female nurse. The situation has finally righted itself, and while there is a distinct field for the 8,169 male nurses (2.3 per cent), nursing is woman's natural profession.

American nurses (1944-45) consisted of student nurses, 126,576; assigned to military service, 76,003; private duty nurses in hospitals, 23,949; nursing personnel in registered hospitals, not including private duty nurses, 125,458; public health nurses, 20,818; industrial nurses, 13,872; practical nurses and other auxiliary workers in registered hospitals, 155,236; nurses aides, 48,859. The 79,940 nurses authorized by the Federal Government Nursing Services (1945-46) were assigned as follows: *Military*: Army Nurse Corps, 60,000; Navy Nurse Corps, 11,000; *Civilian*: Children's Bureau, 13; Civil Service Commission, 1; Freedman's Hospital, 100; Indian Affairs, 753; Office of Labor, Department of Agriculture, 375; Panama Canal Service, 247; St. Elizabeths Hospital, 189; Tennessee Valley Authority, 17; U. S. Public Health Service, 1,605; Veterans Administration, 5,509. What a country!



There has never been an international medical organization to compare with the International Council of Nurses, whose membership, before the second World War, reached into all the continents of the world: *Australia* (Australian Nursing Federation); *Belgium* (National Federation of Belgian Nurses); *Brazil* (Brazilian Graduate Nurses Association); *Bulgaria* (Bulgarian Nurses Association); *Canada* (Canadian Nurses Association); *China* (Nurses Association of China); *Cuba* (National Association of Nurses of Cuba); *Czechoslovakia* (Graduate Nurses Association of Czechoslovakia); *Denmark* (Danish Council of Nurses); *Estonia* (Estonian Nurses Association); *Finland* (National Council of Nurses of Finland); *France* (National Association of Trained Nurses of France); *Germany* (Nurses Association of Germany); *Great Britain* (National Council of Nurses of Great Britain); *Greece* (Graduate Nurses Association of Greece); *Holland* (National Nurses Association of Holland); *Hungary* (Hungarian Nurses Association); *Iceland* (Icelandic Nurses Association); *India* (Trained Nurses Association of India); *Irish Free State* (National Council of Trained Nurses of the Irish Free State); *Japan* (Nurses Association of the Japanese Empire); *New Zealand* (New Zealand Trained Nurses Association); *Norway* (Norwegian Nurses Association); *Philippine Islands* (Filipino Nurses Association); *Poland* (National Council of Polish Professional Nurses); *Rumania* (National Association of Trained Nurses of Rumania); *South Africa* (South African Trained Nurses Association); *Sweden* (Swedish Nurses Association); *Switzerland* (National Association of Nurses of Registered Training Schools of Switzerland); *United States* (American Nurses Association); *Yugoslavia* (Yugoslavian Graduate Nurses Association).

Nurses can be regimented, as they were in Italy under fascism, and they can be brutalized as they were in Germany, even before nazism, but in countries in which human rights are respected nurses are the ideal apostles of democracy. Disease is exceedingly democratic, and death is the greatest leveler of all. In assuaging pain or ministering to the suffering, the nurse on her errand of mercy is without sect. The intrusion of race or creed is desecration of the sacred temple of healing. The noblest aspect of modern nursing is its international spirit. In every language of the world has been heard the phrase, "There goes an Ameri-

can nurse!" The white cap readily fits the head of the Caucasian nurse, the Negro nurse, the Chinese nurse, the Indian nurse, and the Maori nurse. Let us work and pray that the unity of nursing may be the sunrise of the unity of the diversified, divided, and long-quarreling children of Mother Earth.



# The March of the Nurse



## HEBRAIC ERA

—"But Deborah Rebekah's nurse died, and she was buried beneath Beth-el under an oak: and the name of it was called Allon-bachuth." Gen. 35:8.

—"Then said his sister to Pharaoh's daughter, Shall I go and call to thee a nurse of the Hebrew women that she may nurse the child for thee? And Pharaoh's daughter said unto her, Take this child away and nurse it for me, and I will give thee thy wages. And the woman took the child and nursed it." Exod. 2:7-9.

## HOMERIC ERA

—Slave nurses of Homer: the fair-girdled nurse of Hector's child (*Iliad*), and the true-hearted Eurycleia in the household of Ulysses (*Odyssey*).

## FIFTH CENTURY, B.C.

428 B.C.—In the *Hippolytus* of Euripides, produced at Athens, the nurse of Phaedra plays an important rôle.

## FOURTH CENTURY, B.C.

—Plato, in his last work (*Laws* vii), discusses the duties of a children's nurse.

## FIRST CENTURY, A.D.

A.D. 60—Phoebe, described by the Apostle Paul as a *diakonos* (deaconess) of the church of Cenchreae, "a succourer of many, and of myself also" (Romans 16:1-2), is regarded as the first visiting nurse.

## SECOND CENTURY

107—Pliny the Younger writes (*Ep.* vii, 19) in lamentation of Fannia, whose death is impending because of the assiduity with which she has nursed Junia, one of the Vestal Virgins.

## FOURTH CENTURY

369—Basil establishes at Caesarea in Capadocia the institution called the "Basiliad," containing a staff of doctors and nurses (*nosocomi*).

372—Ephraim of Syria (Ephraem Syrus), with money collected from wealthy Christians, establishes three hundred beds for the plague-stricken in the public galleries of Edessa, visiting and nursing the patients daily.

390—Fabiola, disciple of St. Jerome, establishes in Rome the hospital (*nosocomion*) in which she serves as chief nurse (*Ep.* lxxvii).

## FIFTH CENTURY

—Brigit of Kildare, slave-born daughter of a king's concubine, gives her father's cattle to the poor and her services to the sick and blind ("The Mary of the Gaels").

—Athenais, the learned pagan daughter of the Athenian philosopher Leontius, passes from the scholar's desk to the imperial throne, becoming Eudocia Augusta after her baptism and marriage to Theodosius the Younger; later an exile in the Holy Land, the fallen empress establishes monasteries and hospitals in Jerusalem, personally nursing the sick.

## SIXTH CENTURY

—Radegunda, daughter and wife of a king, foundress of the monastery at Poitiers (Venantius Fortunatus, the Latin poet who lived in Radegunda's monastery, testified that, as a nurse, she "shrank from no disease, not even leprosy").

542—Childebert I and his wife Ultrogota established a nosocomium at Lyons (Grand Hôtel-Dieu de Lyon).

542—Caesarius, bishop of Arles for forty years, establishes a hospital in his diocese.

580—Masona, the Gothic bishop of Merida in Spain, establishes a hospital open to knight and slave, and to all creeds.

#### SEVENTH CENTURY

—Ethelburga, abbess of Barking, described by the Venerable Bede (*Ecclesiastical History* iv, 6) as "a mother and nurse (*mater ac nutrix*) of women devoted to God."

651—Landericus, bishop of Paris, establishes Hôtel-Dieu de Paris, and in this hospital for twelve centuries the unchanging Augustinian Sisters nurse the sick.

#### NINTH CENTURY

—Plan of the infirmary of the monastery of St. Gall in Switzerland (earliest extant plan of an infirmary).

#### ELEVENTH CENTURY

1100—Robert of Abrisel establishes a Benedictine double monastery at Frontevraud under the rule of an abbess, with a penitentiary for fallen women and hospital for every disease (Baldric: "The poor were received, the feeble were not refused, nor women of evil life, nor sinners, neither lepers nor the helpless").

#### TWELFTH CENTURY

1101—Matilda ("Mold the good queen"), who washes the feet of lepers and kisses their scars, builds a hospital for lepers at St. Giles-in-the-Fields, London.

1123—Rahere the Founder, born in the reign of William the Conqueror, goes on a pilgrimage to Rome in penance for the dissipations of his youth; at the Three Fountains he contracts malaria, and in a vision sees the Apostle Bartholomew; returning to London, he builds Saint Bartholomew's Hospital.

1155—The Order of Augustinians of Dieppe, France, organizes as hospital nuns.

1180—Lambert le Bègue, wealthy priest of Liège, who founded the hospital and church of Saint Christopher for the families of fallen crusaders, establishes a secular community (*beguinage*) of nursing sisters (origin of the Beguines).

1185—Guy of Montpellier founds in his native town the hospital in which originates the nursing laic brotherhood of the Order of the Holy Ghost (called by Innocent III to take charge of the Hospital of the Holy Ghost at Rome, 1204).

#### THIRTEENTH CENTURY

1204—Pope Innocent III, who gave a powerful impulse to the hospital movement, builds at Rome, by the Old Bridge across the Tiber, the mother hospital of the Holy Ghost (Hospital of the Santo Spirito).

1206—Francesco Bernardone (Saint Francis of Assisi), once crowned with garlands as king of the revelers, becomes the nursing apostle of the lepers (instituted Order of the Franciscans, 1209).

1212—Clara (Clare), daughter of a knightly family of Assisi, becomes a follower of Francis; she establishes the Franciscan nuns (Poor Clares), whose duties include the nursing of the sick.

1215—Edeua, daughter of Wakerilda of Writele, the first recorded Sister of Saint Bartholomew's Hospital of London.

1229—Elisabeth of Hungary, daughter of the king, after a life dedicated to hospitals and nursing, builds in Marburg her last hospital in memory of Saint Francis (At the same time, she built her tomb, for Saint Elisabeth exhausted herself at twenty-four, and was buried in the chapel of this hospital).

1234—Hedwig, who nurses the incurables, and kisses the feet of lepers, establishes with her husband, the philanthropic Duke of Silesia, a leprosy at Neumarkt.

—Agnes of Bohemia, noted as a hospital nurse, builds the hospital of Saint Peter in Prague.

1253—Anna, sister of Agnes of Bohemia, and wife of the son of Hedwig, builds in Breslau a hospital in memory of Elisabeth of Hungary.

#### FOURTEENTH CENTURY

1374—Catherine Benincasa (Saint Catherine of Siena, patroness of nursing), who nursed leprosy and cancer and shrank from no disease, succors the plague-stricken at Siena.



1400—Bernardino of Siena, devoting his youth to the service of the sick, nurses the plague-sufferers in the hospital of Santa Maria della Scala where Catherine of Siena had worked before him (As a result of his labors, Saint Bernardino nearly died of the plague, but lived to become the leading Franciscan preacher of his day).

#### FIFTEENTH CENTURY

1497—Catherine of Genoa, who spent her life in the city hospital as nurse and directress, attends the sick during the plague of Genoa.

#### SIXTEENTH CENTURY

1538—The Portuguese Juan de Dios (John of God), walking with a basket through the streets of Granada, begging alms for the patients in his hired house, establishes the Brothers of Mercy (they nurse the sick of every race and creed in all countries).

1551—Rose Fysshier, the first matron of Saint Bartholomew's Hospital to be mentioned by name.

1553—The first complete list of Sisters of Saint Bartholomew's Hospital: Elizabeth Clark, Jone Goodyere, Alys Wright, Elizabeth Trewillian, Kateryn Marshall, Alys Yonglive, Sybyll Jelly, Marget Edyman, Jone Cantrell, Eve Williams, Johan Lamporte, and the foole or the innocent one.

#### SEVENTEENTH CENTURY

1633—Vincent de Paul, builder of foundling asylums in Paris and a hospital for galley slaves at Marseilles, inaugurates a new era in nursing by establishing the Sisters of Charity under the leadership of Louise de Marillac le Gras ("Oh, mon Dieu! How can it be said that I founded the Sisters of Charity? I did not even think of it, nor did Mademoiselle le Gras").

1639—Three nuns of the Order of Augustinians of Dieppe, France, arrive at Quebec and nurse the Indians of Canada stricken by smallpox (establish the first primitive Hôtel-Dieu in the New World).

1644—Jeanne Mance, in the wilderness on the island of Montreal, Canada, erects the palisaded Hôtel-Dieu de Saint Joseph and remains its directress during her life.

1647—Margaret Whitaker, the first recorded nurse of Saint Bartholomew's Hospital.

1658—The Augustinian Sisters from Dieppe, having nursed aborigines, colonists, and soldiers in primitive cabins, and having trained the Indian women as assistant nurses, establish L'Hôtel-Dieu de Quebec.

1659—Jeanne Mance brings from France three nursing Sisters (Hospital Nuns of Saint Joseph) for her Hôtel-Dieu at Montreal: Judith Moreau de Brésoles (pharmacist, herbalist, and head nurse); Catherine Mace; and Marie Maillet.

1665—The Plague Year in London: some of the leading physicians leave the city to escape the epidemic. Margaret Blague, matron of Saint Bartholomew's Hospital, remains constantly at her post.

#### EIGHTEENTH CENTURY

1730—Thomas Fuller, of Rosehill, Sussex, publishes *Exanthemologia* ("the first English book by a physician in which the qualifications necessary in a sick nurse are set forth in detail").

1775—Nano (or Honora) Nagle, of Cork, having long worked in secret because of the penal laws against religious communities in Ireland, establishes the Order of the Presentation of the Blessed Virgin Mary, for teaching and nursing the poor.

1798—Valentine Seaman, at the New York Hospital, where he is attending surgeon, lectures to nurses on the care of maternity cases.

#### NINETEENTH CENTURY

1809—Elizabeth Ann Bayley Seton (Mother Seton) establishes the Sisters of Charity of Saint Vincent de Paul at Emmitsburg, Maryland: the foundation of the Sisters of Charity in America.

1812—Teresa Carrico and Elizabeth Wells establish the Sisters of Charity of Nazareth in a log cabin in the woods of Nazareth, Kentucky (during the War of 1861-65, the sisters of this community are prominent in the military hospitals of Kentucky, nursing the Blue and the Gray with equal devotion).

1813—Ladies Benevolent Society of Charleston, South Carolina, begins to nurse the sick at home: first known example of

organized untrained nursing in America (the Society celebrated its centenary in 1913).

1816—Mary Aikenhead, of Cork, founds the Irish Sisters of Charity (Mother Aikenhead became superintendent of Saint Vincent's Hospital of Dublin, the first hospital in Ireland to be served by nuns).

1817—John Bunnell Davis, a founder and physician of the Universal Dispensary for Sick Indigent Children (London) publishes *Inquiry into Causes of Mortality among Children*, in which he anticipates the child welfare nurse. ("If benevolent ladies could be prevailed upon to form district committees to visit and inspect the health of sick, indigent children, much practical good would result from a medical and moral point of view.")

—Three nuns from Saint Joseph's-in-the-Valley of Emmitsburg, Maryland (the Motherhouse of the Sisters of Charity in America) come to the city of New York to take charge of its orphans.

1827—Catharine McAuley, of Dublin, having inherited immense wealth, erects the House of our Blessed Lady of Mercy, and founds the Order of Sisters of Mercy, whose vows include nursing.

1829—The author Robert Southey, influenced by the physician Robert Gooch, makes an appeal for Protestant Sisters of Charity (*Colloquies on Society*: "Where is the woman who shall be the Clara or the Teresa of Protestant England, labouring for the certain benefit of her sex, with their ardour, but without their delusion?").

1836—Theodor Fliedner, Protestant pastor, revives the early Christian order of deaconesses in the village of Kaiserswerth on the Rhine (Fliedner's wife, Friederike Münster, the first superintendent of the Kaiserswerth institute; Gertrude Reichardt, member of a medical family, the first deaconess; Friederike died in 1842, and Caroline Bertheau succeeded her as wife and superintendent).

1839—Joseph Warrington, physician to the Philadelphia Dispensary, a Quaker institution, organizes the Nurse Society of Philadelphia, and publishes *The Nurse's Guide*, "containing a series of instructions to females who wish to engage in the im-

portant business of nursing mother and child in the lying-in chamber."

1840—Elizabeth Fry, the London Quakeress, establishes the Nursing Sisters of Devonshire Square (pioneer institution in England for the training of nurses).

—In the midst of plague, Sisters of Charity open Mount Hope Retreat of Baltimore, Maryland (first called Mount Saint Vincent's Institute), and remain to nurse the insane (the training school now offers to registered nurses a postgraduate course in psychiatric nursing).

1848—Robert Bentley Todd, Irish physician, one of the principal founders of King's College Hospital of London, establishes Saint John's House, the first nursing sisterhood in the Anglican Church (at Todd's request, the sisterhood undertook the entire nursing of King's College Hospital, 1856).

—Priscilla Lydia Sellon establishes and supports with her private wealth the Society of Sisters of Mercy of the Holy Trinity (Sellon Sisters), which develops into an Anglican nursing sisterhood.

1849—Origin of deaconess service in America: Theodor Fliedner brings four deaconesses from Kaiserswerth to Pittsburgh, Pennsylvania.

—St. Vincent's Hospital of New York established by Sisters of Charity.

1851—Florence Nightingale, after visiting Pastor Fliedner and his deaconesses, publishes anonymously her first pamphlet, *The Institute of Kaiserswerth on the Rhine*, 32 pages; printed by the inmates of the London Ragged Colonial Training School, Westminster. ("With the feeling with which a pilgrim first looks on the Keiron, I saw the Rhine, dearer to me than the Nile.")

—Upton Richards, vicar of All Saints of London, founds the Anglican nursing order of Sisterhood of All Saints.

—Sisters of Mercy take charge of Chicago's first hospital, Illinois Hospital of the Lakes (opened in the rented rooms of a hotel), the name of which is changed to Mercy Hospital (Hosmer Allen Johnson, the first interne; Edmund Andrews, surgeon for nearly half a century; the hospital notable for the surgical work of John Benjamin Murphy).



1851—Marie Cederskiöld, trained at Kaiserswerth, is appointed directress of the Swedish Deaconess Institute in Stockholm (origin of organized nursing in Sweden).

1852—William Augustus Muhlenberg, after visiting Kaiserswerth, organizes (began 1845) the Sisterhood of the Church of the Holy Communion, thus introducing deaconess nurses into the Protestant Episcopal Church of America.

1853—Florence Nightingale, whose life has been unendurable without nursing, is permitted by her family to accept, at the age of thirty-three, her first position: superintendent of the Establishment for Gentlewomen during Illness, Number 1 Upper Harley Street, London.

—Louisa Twining, of London, begins to visit workhouses: origin of her reform of the workhouse system, including its nursing ("the Mrs. Fry of the workhouses").

1854—William Howard Russell, the first special correspondent, reporting the breakdown of the commissariat and the collapse of the medical department in the Crimea, makes the British people realize the need for nurses at the front ("it is found that the commonest appliances of a workhouse sick-ward are wanting, and that the men must die through the medical staff of the British Army having forgotten that old rags are necessary for the dressing of wounds"; dispatches to *London Times*, October 9-12, 1854).

—Florence Nightingale, having read the dispatches of William Howard Russell in the *London Times*, writes to the wife of Sidney Herbert, offering to lead a group of nurses to Scutari. ("My Dearest . . . uncle went down this morning to ask my father and mother's consent"; letter written from 1 Upper Harley Street, October 14, 1854.)

—Sidney Herbert, secretary-at-war, known as the man of routine, steps out of routine in suggesting the first employment of female nurses in the British army: he requests Florence Nightingale to proceed to Scutari in charge of nurses during the Crimean War. ("There is but one person in England that I know of who would be capable of organizing and superintending such a scheme"; her letter of October 14,

and his letter of October 15, written from Bournemouth, crossed in the mail.)

1854—Florence Nightingale and Sidney Herbert meet and arrange to send nurses to the abyss at Scutari (October 16, 1854).

—Florence Nightingale receives from Sidney Herbert her commission as "Superintendent of the female nursing establishment in the English General Military Hospitals in Turkey" (October 19, 1854).

—Florence Nightingale, with her party of thirty-eight hastily selected nurses, arrives on the Asiatic shore of the Bosphorus in the shambles of Scutari (November 4, 1854: the definite birthday of the new era in nursing).

—John Mason Neele, of London, clergyman and prolific writer, establishes at East Grinstead the nursing order of Saint Margaret's Sisterhood.

1855—Sisters of Mercy from Ireland arrive in San Francisco, and nurse the cholera patients (beginning of better nursing in California; later the Sisters become the heroines of San Francisco's smallpox epidemic).

1856—Florence Nightingale denounces Netley Hospital as unsanitary (this was the chief military hospital of England, in the process of construction by Lord Panmure, "on the old corridor lines"), and advocates the pavilion system of hospitals.

—Sisters of the Daughters of Charity of Saint Vincent de Paul from the Motherhouse in Emmitsburg, Maryland, arriving in an Indian settlement in Los Angeles, establish in a small adobe Saint Vincent's Hospital, one of the early hospitals of California.

1858—At the Liverpool meeting of the National Association for the Promotion of Social Science, two papers by Florence Nightingale are read, then printed in the transactions and in separate form as *Notes on Hospitals*. (Sir James Paget: "It appears to me to be the most valuable contribution to sanitary science in application to medical institutions that I have ever read.")

—Louisa Twining, founder of the Central Society for the Promotion of Workhouse Visiting, distributes flowers to the sick paupers in workhouses: origin of the Flower Mission.



1858—William Augustus Muhlenberg, having founded the first American order of Protestant Episcopal deaconesses, establishes Saint Luke's Hospital of New York.

1859—Harriet Martineau issues *England and Her Soldiers*, a popularization of Florence Nightingale's blue book on the health and hospital administration of the British army.

—Florence Nightingale, in the last days of December, issues *Notes on Nursing*, of which 15,000 copies are sold within a month. (Harriet Martineau: "This is a work of genius if ever I saw one, and it will operate accordingly. It is so real and so intense, that it will, I doubt not, create an Order of Nurses before it has finished its work.")

—The Liverpool Quaker, William Rathbone, father of modern district nursing, establishes the first District Nursing Association (non-interference with the religious beliefs of patients).

—La Source, The Normal Evangelical School for Free Nurses, established in Lausanne, Switzerland.

1860—Florence Nightingale, with the Nightingale fund of £44,000, opens (June 24, 1860, "a memorable day in the history of the nineteenth century") the Nightingale Training School for Nurses at Saint Thomas's Hospital, near London Bridge. (Miss Nightingale chose this hospital because of the presence of Mrs. S. E. Wardroper, matron of Saint Thomas's Hospital, 1854-87; superintendent of the Nightingale Training School for Nurses, 1860-87.)

—Florence Nightingale creates, at Fort Pitt, Chatham, the Army Medical School, appointing Edmund Alexander Parkes to the chair of hygiene, and William Aitken to the chair of pathology (both of these physicians were in the Crimea; as Miss Nightingale held no official position, she accomplished her reform work at this period through Sidney Herbert).

1861—General Report of the Barracks and Hospital Commission, fundamentally the work of Florence Nightingale, is presented to Parliament (a landmark in the health of the British Army).

—Clara Barton, aroused by the blast of the trumpet, attends (at Washington Infir-

mary) the first sick and wounded of the Civil War (April 20, 1861: "Hence, if she was not the first person in the country in this noble work, no one could have been more than a few hours before her").

1861—Dorothea Lynde Dix, who aroused public opinion and swayed legislatures in her reform of prisons, almshouses, and insane asylums, is appointed, at the outbreak of the Civil War, superintendent of nurses, having undisputed control of their assignment to duty (although in her sixties, Miss Dix served throughout the war without a day's furlough).

—Sister Anthony of Cincinnati, Ohio (born in Limerick, Ireland, as Mary O'Connell, and trained by the Sisters of Charity at Emmitsburg, Maryland) attends the wounded of the Civil War.

1862—The poet Walt Whitman begins to visit camp, field, and hospital as friend and volunteer nurse in the American Civil War ("the marrow of the tragedy concentrated in those Army Hospitals"; his diary reproduced in *Specimen Days and Collect*; his letters in the *Wound Dresser*; and his reactions in various editions of *Leaves of Grass*).

1863—Sisters of Charity of Saint Vincent de Paul from the Motherhouse of Emmitsburg, Maryland, taking charge of military hospitals at the beginning of the Civil War, become conspicuous for their nursing services at Gettysburg (Emmitsburg, near the Pennsylvania border, is ten miles from Gettysburg. Ambrose Kennedy of Rhode Island: "A log cabin on the mountain side was the original home of this benevolent community. From here the Sisters began their work of charity half a century before the outbreak of the Civil War. Little did Mother Seton, the foundress of the institution, then realize that within that neighborhood would one day be fought the bloodiest battle in American history").

—Crown Princess Louise founds the Danish Deaconess Institute, origin of organized nursing in Denmark, under the direction of Sister Louise Martinic Laurette Conring (succeeded by Sister Sophie Zahrtmann).

—Mary Ashton Rice Livermore, who joined the United States Sanitary Commission at the beginning of the Civil War,



visiting army posts and hospitals and forming numerous aid societies, organizes (with Jane C. Hoge) the remarkable Northwestern Sanitary Fair in Chicago.

1863—Dunant, after witnessing the slaughter at Solferino (*Un Souvenir de Solferino*, 1862), originates the Red Cross at Geneva.

1865—Agnes Elizabeth Jones, trained at Kaiserswerth and in the Nightingale School, is chosen by Florence Nightingale and William Rathbone as first superintendent of the Workhouse Nurses Training School of Liverpool: origin of trained nursing in workhouses.

—Jean Baptiste Lamy, American archbishop of French birth, calls upon the Sisters of Charity at Cincinnati to establish a hospital and orphanage in the West: the first hospital in New Mexico still in existence, Saint Vincent's Sanatorium and Hospital, is thus opened in Lamy's residence at Santa Fe.

1866—Sophie Lejonhufvud-Adlersparre, disciple of the authoress Fredrika Bremer, sends to the Nightingale School at Saint Thomas's Hospital, Emmy Rappe who returns as Sweden's first trained nurse.

1867—The Metropolitan Poor Act for the reform of workhouse nursing, mainly at the instigation of Florence Nightingale, becomes law ("the starting-point of the modern development of Poor Law medical relief").

1868—Lucy Osburn, a Nightingale nurse chosen by the Lady-in-Chief, founds the training school of the Sydney Hospital of Australia.

1869—Samuel David Gross (president of American Medical Association, and professor of surgery in Jefferson Medical College) presents to the Association, at its meeting in New Orleans, the first report in favor of training of nurses ("Remarks on the Training of Nurses").

1871—Miss Haldane Turriff, early Nightingale nurse at the Sydney Hospital, becomes the first matron of the Alfred Hospital of Melbourne, Australia.

—A hospital with a capacity of four beds, Saint Boniface Hospital, is the first hospital built in Manitoba, Canada (since 1844 the Grey Nuns from Montreal had nursed the

sick poor of the wilds of Saint Boniface, in their homes).

1873—Linda Richards, of Potsdam, New York, receives her diploma from the Training School of New England Hospital for Women and Children (Roxbury, Mass.), thereby becoming "America's first trained nurse."

—Helen Bowden (Sister Helen of the Sisterhood of All Saints) establishes at Bellevue Hospital, New York, the first training school in America under the Nightingale system.

—Three training schools for nurses established in the United States: Bellevue Hospital Training School; Connecticut Training School for Nurses, New Haven; Boston Training School for Nurses at the Massachusetts General Hospital.

—Rebecca Strong is appointed matron of the Dundee Infirmary, Scotland, where she establishes a training school and modernizes the nursing.

1874—Hospitals in England no longer accept nurses who cannot read and write.

—Henry Wentworth Acland, regius professor of medicine in the University of Oxford, edits Florence Lees's *Handbook for Hospital Sisters*; in the preface he makes the first public appeal for the state registration of trained nurses.

1875—Florence Lees (Mrs. Dacre Craven) raises the educational standard of nursing with the establishment of the Metropolitan and National Nursing Association of England.

—The neurologist Daniel H. Kitchen, of New York, proposes in connection with the Charity Hospital on Blackwell's Island, "a municipal school for nurses, under the city government" (author of *Manual for Attendants upon the Sick*, 1877).

1876—Carl Emil Fenger, physician and burgomaster of Copenhagen, introduces the British system of nursing into Denmark (modernization of Danish nursing).

1877—The Woman's Branch of the New York City Mission, for the first time in America, sends trained nurses into the homes of the sick poor.

—Dyce Duckworth, physician, and Alfred Willett, surgeon, inaugurate systematic in-

struction for all nurses of Saint Bartholomew's Hospital.

1877—Rachel Frances Lumsden establishes and superintends the Hospital for Sick Children at Aberdeen (origin of trained nursing in northern Scotland; succeeded by her sister, Katherine Lumsden).

1878—A Handbook of Nursing for Family and General Use, published in November under the direction of the Connecticut Training School for Nurses, State Hospital, New Haven, Connecticut.

1879—Felix Adler (founder of New York Society for Ethical Culture, the first free kindergarten in the city, the first American society for child study, pioneer vocational schools, and author of the first tenement-house law) establishes free dispensaries and the first non-sectarian district nursing in America (under direction of Effie Benedict of Bellevue).

—Mary Mahoney graduates from the New England Hospital for Women and Children as the first colored nurse.

—Angela Georgina Burdett-Coutts (Baroness Burdett-Coutts of Highgate and Brookfield, Middlesex), the richest heiress in all England in her early twenties, whose philanthropic hand stretched around the world, sends trained nurses to the war in Zululand.

—Edward Cowles establishes (at the McLean Asylum in Massachusetts) the first training school for nurses in a hospital for the insane (school formally organized, 1882).

1880—The Sisters of Saint Joseph of Carondelet open Saint Mary's Hospital and Sanatorium at Tucson, the first hospital in Arizona.

1881—The United States is finally compelled by Clara Barton to join the international Red Cross.

—Ethel Gordon Manson becomes matron and superintendent of nursing, Saint Bartholomew's Hospital.

—Theodore Martinus Trautner, government physician on the island of Fünen, improves the nursing system in the rural districts of Denmark.

—Sophie Lejonhufvud-Adlersparre founds the Fredrika Bremer Association (advancement of nursing education in Sweden).

1881—Charlotte Blake Brown, pioneer woman surgeon of California, initiates training school for nurses in her Pacific Dispensary for Women and Children at San Francisco.

1883—Abraham Jacobi delivers address, "The Historical Development of Modern Nursing" at the first commencement of the Mount Sinai Training School for Nurses, New York (organized 1881).

1884—Margaret Huxley (niece of Thomas Henry Huxley), appointed matron of Sir Patrick Dun's Hospital of Dublin, improves the training of nurses in Ireland.

—Alfhild Ehrenborg, trained in the Nightingale School at Saint Thomas's Hospital, begins the instruction of Swedish nurses in Stockholm.

—Mary Agnes Snively, Canadian graduate of Bellevue Hospital, returns to Canada as the superintendent of the training school for nurses of the Toronto General Hospital.

1885—Countess of Dufferin (Harriot Hamilton), in frequent consultation with Florence Nightingale, establishes in India the National Association for Supplying Medical Aid to the Women of India.

—In December, Linda Richards arrives in Japan to organize in that country its first training school for nurses.

1886—Sarah E. Post, Bellevue nurse and physician (Woman's Medical College of the N. Y. Infirmary for Women and Children, 1882), edits *The Nightingale*, the first nursing journal.

—First training school for native nurses in India is established at Cama Hospital in Bombay under the superintendency of Edith Atkinson (Countess of Dufferin's Fund).

—Nurses in New York endeavor to organize the Philomena Society (unsuccessful, though interesting as a "first attempt" of nurses to organize themselves).

—In Juneau, the mining town at the mouth of Gold Creek where the prospectors Joseph Juneau and Richard Harris discovered gold, the Sisters of Saint Ann of Lachine, Quebec, establish the first hospital in Alaska.

1887—In the fiftieth year of her reign, Queen Victoria's Jubilee Institute for Nurses is founded to provide trained nursing for the sick poor in their homes.



1887—Ethel Gordon Manson, in the year of her marriage to the gynecologist Bedford Fenwick, organizes the British Nurses Association of which she is the first member and the first president.

—Isla Stewart, from the Nightingale School at Saint Thomas's Hospital, heroine of the Darenth Smallpox Camp, appointed matron of Saint Bartholomew's Hospital, institutes important improvements in the nursing service.

1888—*The Trained Nurse* (Volume I, Number 1, August) issued at Buffalo under editorship of Margaret Elliot Francis.

—Japan's first trained nurses complete their course in the school organized by Linda Richards. ("In 1888 Japan for the first time possessed graduate nurses of her own. In June of that year we gave diplomas to four young women, well fitted for their profession.")

1889—Sophia, queen dowager of Sweden, establishes in Stockholm the Sophiahemmet, hospital and central home for the education of Protestant nurses (Sophia Sisters).

—Clara Weeks issues, in New York, *A Textbook of Nursing* ("the first American textbook written by a nurse").

—The training school of Bellevue Hospital establishes the first alumnae association of nurses.

—At the instigation of Mother Alfred, Saint Mary's Hospital, the first hospital in Rochester, Minnesota, is established by five Sisters of Saint Francis of the Congregation of Our Lady of Lourdes: Sister Hyacinth, Sister Constantine, Sister Sylvester, Sister Sienna, Sister Sidelis (opened with thirteen patients; the medical and executive staff consisted of William Worrell Mayo, then seventy years of age; his son William James Mayo, who had been in practice for six years; and the younger son, Charles Horace Mayo, who had graduated the previous year; the first hospital experience of the brothers Mayo).

—Johns Hopkins Hospital of Baltimore opened, with Isabel Adams Hampton (of Welland, Ontario) as superintendent of Nurses and principal of the Training School.

1890—The first school of nursing in the Northwest is opened at Good Samaritan Hospital of Portland, Oregon (the hospital

was founded by the Protestant Episcopal Diocese of Oregon, 1875).

1890—Norah Livingston, of the New York Hospital, is appointed superintendent of the training school for nurses of the Montreal General Hospital (Miss Snively at the Toronto and Miss Livingston at the Montreal modernize nursing in Canada).

—Lavinia Lloyd Dock, Bellevue nurse, issues, in New York, *Textbook of Materia Medica for Nurses* (the first materia medica written by a nurse).

1891—Amy Turton (trained in Royal Edinburgh Infirmary), Scotchwoman living in Florence and corresponding with Florence Nightingale, initiates the movement for modern nursing in Italy (obtains Grace Baxter from Johns Hopkins Hospital, 1896).

—Lystra Gretter is the first to establish, in the Farrand Training School for Nurses, of Harper Hospital, Detroit, the eight-hour day for nurses (Mrs. Gretter is also remembered for her conversion of the Hippocratic Oath to the Nightingale Pledge).

—Phillips Brooks, bishop and orator, formally opens the Vincent Memorial Hospital of Boston for wage-earning women, erected in memory of the Anglo-American actress, Mary Ann Vincent.

—Provident Hospital established in Chicago, Illinois (staff entirely colored, and the training school for the education of colored nurses only).

1892—Amy Hughes, superintendent of Queen's Nurses in Bloomsbury Square, inaugurates school nursing in London (origin of school nursing; Liverpool 1893).

—Training school for colored nurses established as integral part of Tuskegee Institute, Alabama.

1893—Mrs. Bedford Fenwick begins to edit the *Nursing Record* (weekly, founded 1888).

—First National nursing organization is founded in America under the leadership of Isabel Adams Hampton: Society of Superintendents of Training Schools, now the League for Nursing Education.

—Isabel Adams Hampton issues, in Philadelphia, *Nursing: Its Principles and Practice*.

—Lillian D. Wald, a graduate of the New York Hospital Training School for

Nurses, establishes in New York, with the assistance of her classmate, Mary Brewster, the first Nurses' Settlement, since known as Henry Street Settlement (in the same year Miss Wald introduces a winged phrase: "public health nurses").

1893—Rebecca Strong, now matron of the Royal Infirmary of Glasgow, inaugurates (following the suggestion of William Macewen, professor of surgery, University of Glasgow) the first preliminary course for probationers prior to their entering the hospital.

1894—Isla Stewart establishes and becomes first president of the Matrons' Council of Great Britain and Ireland (for the state registration of nurses).

—Catherine Wood, founder of the first Nurses Hostel, is requested by the *British Medical Journal* to investigate the condition of English and Welsh workhouse infirmaries (subsequently invited by the Irish Medical Association to conduct a similar research in Ireland).

1895—Grace Campbell Neill, trained in nursing and midwifery in the hospitals of London, superintendent of the Children's Hospital of Pendelbury in Lancashire, England, is the first to be appointed assistant inspector of Hospitals and Asylums in New Zealand (the most important nurse of New Zealand; succeeded by Hester Maclean).

—Vermont Marble Works is the first to engage an industrial nurse (Ada Mayo Stewart) to visit sick employees and their families.

1896—Grace Baxter, born in Italy of British parents, trained in Johns Hopkins Hospital of Baltimore, returns to Italy to modernize its nursing (superintendent, Blue Cross Nurses in Naples).

—Margaret Huxley inaugurates in Dublin the first *central school* for probationers (student nurses from several hospitals brought together for instruction).

—Second national nursing organization founded in America: Nurses Associated Alumnae of the United States and Canada, with Isabel Adams Hampton as first president (since 1911, American Nurses Association).

—Rose Hawthorne (Mrs. George Parsons Lathrop), after training at the New York

Cancer Hospital, rents a flat in the New York slums to nurse incurable cancer patients (the service to which she devotes the remaining thirty years of her life).

1897—The-Nursing-in-Workhouses Order becomes law: the end of untrained pauper nurses in workhouses in England and Wales.

—Alice Huber (Mother Rose) of Louisville, Kentucky, is the first to join Rose Hawthorne (at 668 Water Street, New York) in nursing destitute sufferers of incurable cancer.

—The Victorian Order of Nurses, for national district nursing, is organized in Canada by Lady Aberdeen on the diamond jubilee of Queen Victoria.

1898—Training school for colored nurses established at Lincoln Hospital of New York.

—Isabel Adams Hampton (Mrs. Hunter Robb) suggests special courses for qualified nurses in Teachers College, Columbia University (origin of university education for nurses).

—Mary Adelaide Nutting, of Canada, a graduate of Johns Hopkins Hospital School of Nursing, succeeding her teacher, Isabel Adams Hampton as principal of the school and superintendent, improves the preliminary course in nursing education.

—London School Nurses Society begins to function.

—During the Spanish-American War, Anita Newcomb McGee, woman physician in Washington, originates the Army Nurse Corps, which has since been incorporated in the United States Army.

—Municipal nursing initiated by the city of Los Angeles, California.

1899—Mrs. Bedford Fenwick establishes the International Council of Nurses.

—Danish Nurses Association organized under direction of Charlotte Norrie (succeeded by Mrs. Henny Tscherning, leader of Danish nursing).

—Isabel Adams Hampton, Sophia F. Palmer, Sylveen Nye, Annie Damer, Eva Allerton, initiate the movement in America for the state registration of trained nurses. (Miss Palmer: "The greatest need in the nursing profession today is a law that shall place training schools for nurses under the



supervision of the University of the State of New York.")

1899—Nine founders (eight hospital administrators and the editor of *National Hospital Record*), at Cleveland, Ohio, organize the Association of Hospital Superintendents, which becomes the American Hospital Association.

—The Australasian Trained Nurses Association is organized in Sydney, New South Wales.

—Rose Hawthorne, founder of the Servants of Relief for Incurable Cancer, joins the Third Order of Saint Dominic, and becomes Sister Mary Alphonsa (opens Saint Rose's Free Home for Incurable Cancer, at 426 Cherry Street, N. Y. City).

1900—Margaret Huxley is appointed first president of the Nurses Club of Dublin, the first organization of Irish nurses (origin of the Irish Nurses Association).

—Telfair Hospital for Females at Savannah (founded 1885 by Mary Telfair as a hospital for women only) establishes Georgia's first training school for nurses.

—*American Journal of Nursing* established in Philadelphia with Sophia Palmer as first editor.

—Benedictine Sisters of Holy Angels' Convent, responding to an appeal to nurse the victims of an epidemic of malaria, establish Saint Bernard's Hospital at Jonesboro, Arkansas.

## TWENTIETH CENTURY

1901—Mrs. Bedford Fenwick advocates the founding of a College of Nursing in London for the higher education of nurses (established 1916; in less than a decade has an enrollment of over 20,000).

—Rose Hawthorne (Mother Alphonsa) establishes for incurable cancer patients the Rosary Hill Home at Hawthorne, New York.

—Sister Anna Fraentzel of Germany, becoming Signora Anna Celli of Italy (wife of Professor Angelo Celli) issues the first of her important surveys of the status of Italian nursing.

—The Royal Victorian Trained Nurses Association is organized in Victoria, Australia.

—New Zealand is the first country in the

world to inaugurate the state registration of nurses.

1902—Mrs. Bedford Fenwick converts the *Nursing Record* into the *British Journal of Nursing* ("the foremost nursing journal of the world").

—Two Grey Nuns, passing through Saskatoon, Canada, remain to nurse the victims of an epidemic of typhoid fever; physicians and residents will not permit them to depart, resulting in the establishment of Saint Paul's Hospital of Saskatoon.

—Lillian D. Wald, head of Henry Street Settlement, initiating school nursing in New York, appoints Lina Lavanche Rogers as "the first public school nurse in America."

—Queen Alexandra's Imperial Military Nursing Service is established by Edward VII: "Whereas we deem it expedient to further provide for the nursing services of our Army, our will and pleasure is that an Imperial Military Nursing Service, to be designated the Queen Alexandra's Imperial Military Nursing Service, and comprising our Army Nursing Service, shall be established. Edward R. I." (foreign service when ordered; pension and compulsory retirement at 55).

—Miss Sidney Jane Browne, superintendent of hospitals during the Boer War, receives in camp at Pretoria, South Africa, her appointment as first matron-in-chief of Queen Alexandra's Imperial Military Nursing Service.

1903—North Carolina is the first state to secure registration for nurses (the Tar Heel State again the pioneer when it became the first state in the United States to include birth control information as part of its public health campaign).

—William Henry Welch, of Johns Hopkins, advocates the state registration of nurses by nurse examiners only.

—Specialism in nursing: the tuberculosis nurse in New York and Baltimore.

—Agnes Karll, leader of secular nursing in Germany, organizes and becomes first president of the German Nurses Association. ("Undeveloped and timid women will do better to remain in the Deaconess or Red Cross orders, where they never have to think for themselves. Above all, in our organization we wish to preserve personal

freedom and self-government on a rational basis.")

1904—Genevieve Cooke, one of the organizers of the California State Nurses Association (Sophia Rutley, first president), becomes the first editor of the *Nurses Journal of the Pacific Coast*, published at San Francisco.

—Amy Turton builds, near Florence, Italy's first sanatorium for incipient tuberculosis.

1905—Toronto General Hospital issues *The Canadian Nurse* (now the official journal of the nurses of Canada).

1906—First training school for nurses in Arkansas is opened in Saint Vincent's Infirmary (established 1888) at Little Rock.

—First postgraduate course in district nursing in America is announced by Boston Instructive District Nursing Association (established 1886).

1907—Mary Adelaide Nutting is appointed professor of institutional administration, Teachers College, Columbia University (the first nurse to occupy a university chair).

—Sir Frederic Truby King, medical graduate of Edinburgh University (director of child welfare, New Zealand), organizes the Royal New Zealand Society for the Health of Women and Children (sponsored by Governor and Lady Plunket, and thus the nurses sent out by this society are known as Plunket Nurses).

—Clarence Howard, first Negro graduate of the medical school of Harvard University, founds Mercy Hospital, of Philadelphia, for colored physicians and internes, including a training school for colored nurses (property now occupies an entire city block).

—Mary Adelaide Nutting and Lavinia Lloyd Dock issue, *A History of Nursing* (I-II, 1907; III-IV, 1912; after a generation the chief study of the subject in any language).

—Sister Catherine Voth organizes, at Newton, Kansas, the deaconess nurses of the Mennonite Church.

—Edith Cavell, of the London Hospital, organizes the Belgian School of Certificated Nurses at Brussels.

1907—Mary Agnes Snively organizes and becomes first president of the Canadian Society of Superintendents of Training Schools for Nurses.

1908—Hester Maclean edits *Kai Tiaki*, the first nursing journal in New Zealand.

—Akenehi Hei, the first Maori of New Zealand to graduate as a trained nurse, enters the Native Health department.

—Navy Nurse Corps established through the efforts of the Virginia physician, Presley Marion Rixey, surgeon-general of United States Navy (Esther Hasson, first superintendent of Nurses for the Navy).

—National Association of Colored Graduate Nurses is organized.

—Helen L. Pearse is appointed, by the London County Council, the first superintendent of School Nurses.

—Mary Agnes Snively is appointed president of the Canadian National Association of Trained Nurses.

1909—Edith Cavell, at the London meeting of the International Congress of Nurses, is the representative of Belgian nursing.

—Louise M. Powell organizes the Minnesota University School of Nursing (the first complete university school of nursing) under the leadership of the physician Richard Olding Beard.

—Jane Arminda Delano organizes and becomes first director of the American Red Cross Nursing Service. (In 1917: "We began this work with no thought that within a comparatively short period, eight years, we should be called upon to meet the needs and service of the greatest and most horrible war the world has ever known.")

1910—Amy Turton, no longer working alone, opens modern training school for nurses in the Polyclinic Hospital of Rome, Italy (first matron, Dorothy Snell of England).

—National Council of Swedish Nurses (now the Swedish Nurses Association) organized under the presidency of Emmy Lindhagen, of the Serafimer Hospital of Stockholm.

—Mary Adelaide Nutting is appointed professor of nursing and health, Teachers College, Columbia University (the result of the endowment of the department of nursing by Helen Hartley Jenkins, who acted



upon the recommendation of Lillian D. Wald).

1910—Lina Lavanche Rogers, Canadian nurse, pioneer in municipal school nursing in the city of New York and Pueblo, Colorado, returns to her native land to organize school nursing in Toronto.

—Amy Elizabeth Pope, of Quebec, Canada (instructor in nursing, Presbyterian Hospital of New York, and Saint Luke's Hospital of San Francisco), establishes the Insular School of Nursing in the Municipal Hospital of San Juan, Puerto Rico (succeeded by her assistant, Señorita Pilar Cabrera, who translated into Spanish the textbook on *Practical Nursing* written by Amy Elizabeth Pope in collaboration with her teacher, Anna Caroline Maxwell).

1911—The Countess of Dudley originates bush nursing (rural nursing) in Australia.

1912—The first and second national nursing organizations founded in America establish a third: National Organization for Public Health Nursing, with Lillian D. Wald as first president.

—Jacob H. Schiff, at suggestion of Lillian D. Wald, establishes Rural Nursing Service of American Red Cross.

1913—In Ganado, Arizona, is established the Sage Memorial Hospital whose state-accredited Training School for Nurses enrolls Indian girls of twelve tribes.

—Nathan Straus of New York inaugurates, under direction of Eva Leon, Nurses' Settlement in Jerusalem.

1914—Margaret (Higgins) Sanger, educated at the Nurses Training School of White Plains Hospital, enters the birth control movement of whose latter phase she becomes the leader.

—Father Charles B. Moulinier, regent of the medical school of Marquette University (Milwaukee, Wis.) talking to fourteen Sisters on the porch of a cottage in the grounds of Saint Mary's Hospital (Minneapolis, Minn.), initiates the Catholic Hospital Association of the United States and Canada.

—Maud McCarthy (Dame, Grand Cross, Order of the British Empire) is appointed matron-in-chief, Queen Alexandra's Imperial Military Nursing Service, British Armies in France.

1916—William Henry Welch, nestor of American medicine, in his address to the graduating class of Johns Hopkins Training School for Nurses, appeals for endowment of training schools for nurses and for opportunities for specialized training.

—Ellen Newbold La Motte, of Louisville, Kentucky, a graduate of the Training School of Johns Hopkins Hospital, publishes *The Backwash of War*.

—United States Hospital for Natives is built at Juneau, Alaska.

—Mary Sewall Gardner publishes *Public Health Nursing* (first comprehensive text on the subject).

1917—Julia Catherine Stimson, a graduate of Vassar and of the New York Hospital, goes to France as chief nurse of Base Hospital 21, American Expeditionary Force.

1918—Julia Catherine Stimson is appointed director of the Nursing Service of the American Expeditionary Force.

—Annie Warburton Goodrich, of New Brunswick, New Jersey, originates the Army School of Nursing, of which she becomes the first dean.

1919—Nurses for the first time are registered in Great Britain through the Nurses' Registration Act, mainly the work of Mrs. Bedford Fenwick; within a decade of its foundation, the national board, the General Nursing Council for England and Wales, registered 65,000 nurses.

1920—The Mary Adelaide Nutting Historical Collection is established at Teachers College, Columbia University.

—Julia Catherine Stimson, superintendent of the Army Nurse Corps, is the first nurse to receive the military rank of major.

—First international courses in public health nursing, attended by students of many nations, offered in London by League of Red Cross Societies.

1921—American Protestant Hospital Association organized at West Baden, Indiana. ("In 1925 it was reported that there were more than 600 Protestant hospitals in the United States and Canada in which 10,000 nurses were employed.")

1923—Publication of Josephine Goldmark's *Nursing and Nursing Education in the United States* is the event of the year in American nursing.

1923—Brazil's first school for the training of nurses is established by the persistence of the physician Carlos Chagas ("The establishment of the School of Nursing in Brazil ranks second only in importance to the elimination of yellow fever by Dr. Oswaldo Cruz").

—Annie Warburton Goodrich is appointed professor of nursing education and dean of Yale University School of Nursing.

1924—The two organizations in Canada initiated by Mary Agnes Snively combine to form the Canadian Nurses Association.

1926—Peter Trimble Rowe, of the Protestant Episcopal Church, first missionary bishop of Alaska, interested in the hospital and nursing problems of the North, establishes (with funds wherever he could obtain them, with equipment from an abandoned hospital, on land donated by a fishing village) the Bishop Rowe General Hospital at Wrangell, Alaska.

—Mrs. Bedford Fenwick founds and presides over the British College of Nurses.

1927—History of Nursing Society organized by nursing students of Teachers College, Columbia University, under the inspiration of their professor, Isabel Maitland Stewart.

1934—The Florence Nightingale International Foundation inaugurated at London.

1936—National League of Nursing Education defines the essentials of a good school of nursing: "A good school of nursing is an educational institution which should have as its primary function the preparation of professional nurses."

1937—Revised edition of *A Curriculum Guide for Schools of Nursing* (1st ed., 1917).

1940—*American Journal of Nursing*, on its fortieth birthday, presents at the Philadelphia convention the pageant: "Forty

Years of Nursing in a Democracy" ("the more important milestones in the development of nursing in America").

1941—American Red Cross and Office of Civilian Defense inaugurate a joint program to train 100,000 volunteer nurses' aides (despite initial skepticism, 130,000 women had completed the course by April 30, 1944).

1942—American Red Cross releases impressive recruitment film, *No Greater Glory*, exhibiting the life of the nurse in the Army Nurse Corps and the Navy Nurse Corps.

1943—The outside world begins to hear of the Russian paranurses who fall from sky to earth with first-aid equipment for wounded soldiers isolated from hospital service.

1944—Blood donor centers and mobile units of American Red Cross collect over five million pints of blood contributed by volunteers (the service was established with a single center in 1941; within three years the nursing staff increased from four to more than nine hundred).

—The first birthday of the U. S. Cadet Nurse Corps is celebrated (July 1) in the nation's capital and in various American cities (youngest of the women's uniformed organizations, the 100,000 cadet nurses are identifiable by their gray uniforms marked with silver Maltese crosses and red epaulets).

—The AAF patch is on the shoulders of 30,000 women in uniform: the members of the Army Nurse Corps assigned to the Army Air Forces, the Air Wacs, and the Women's Airforce Service Pilots (Wasps).

1945—Jewish Hospital School of Nursing, Cincinnati, Ohio, has the highest percentage (20.9) of graduates (1925-1945) serving with the armed forces of the United States.



## Bibliographical Notes



ABBESS: "Hic requiescit in pace, Serena Abbatissa . . ." Thus begins the sepulchral inscription (A.D. 514) of the Abbess Serena, of historic interest as the earliest known use of the term "abbess"; the inscription was found (1901) on the site of the convent in Rome over which the Abbess Serena presided until her death at the age of eighty-five. The first known use of the word in English occurs in the *Metrical Chronicle* (1297) of Robert of Gloucester (*fl.* 1260-1300): "nonne & abbese."—Lina Eckenstein, *Woman Under Monasticism* (Cambridge, 1896); article in *Catholic Encyclopedia* (1907), I, 7-10: "There are no Abbesses in the United States"; Emily James Putnam, *The Lady; Studies of Certain Significant Phases of Her History* (New York, 1910); Muriel Joy Hughes: *Women Healers in Medieval Life and Literature* (New York, 1943).

ABBEY: William Dugdale (1605-86), *Monasticon Anglicanum* (1655-73; 1846) and *Antiquities of Warwickshire* (1656; 1786), the former with material collected by Roger Dodsworth (1585-1654), an antiquary of tireless industry who compiled prodigious manuscripts (160 volumes in the Bodleian Library), but published nothing.

ABELARD AND HELOISE: The autobiography of Abelard (*Historia calamitatum*), the *Letters* of Heloise, the studies by Victor Cousin (1836) and Charles de Rémusat (1845), the lively sketch by George Henry Lewes in *Biographical History of Philosophy* (1845-46), and Withington's translation of the Abelard-Heloise rules for the infirmaria in *Medical History from the Earliest Times* (pp. 385-86), are part of the extensive literature on this famous pair.

AIKENHEAD, MARY (1787-1858): *Mary Aikenhead; Her Life, Her Work, and Her Friends*, by S. A. (Dublin, 1882).—The work of the mother of the Irish Sisters of Charity is discussed by James Joseph Walsh (1865-1942), *The World's Debt to the Irish* (Boston, 1926), *These Splendid Sisters* (New York, 1927), and *History of Nursing* (New York, 1929).

ALASKA: Mabel Leroy, "Nursing in Alaska," *Am. Jour. of Nursing* (1923), pp. 925-28; Augusta Mueller, "Nursing at the Top of the World" (*ibid.* (1928), pp. 37-39).

ALCOTT, LOUISA MAY (1832-88): Her career as a nurse (Union Hospital, Georgetown, D. C.) was brief, but all the North read her letters home, revised as *Hospital Sketches* (1863); five years later she wrote America's most popular book for girls, *Little Women* (1868).—Lives by Ednah Dow Cheney (Boston, 1889) and Katharine Anthony (New York, 1938).—Madeline Stern, "Louisa M. Alcott, Civil War Nurse," *Americana* (Somerville, N. J.), XXXVII (1943), 296-325.

ALEUTIAN ISLANDS: W. J. Granberg, "Where Blows the Williwaw," *American Journal of Nursing* (1945), pp. 535-37; a soldier serving with the 713th Signal Aircraft Warning Company describes American nurses "somewhere in the Aleutians," in the desolateness of the world's end where even the seagulls fear the fogs.

ALEXIAD, THE: Anna Comnena (1083-1148), learned daughter of the Byzantine emperor, Alexius I. Comnenus (1048-1118); after her father's death she conspired to dethrone her brother and make her husband emperor; upon the latter's refusal to join in the plot, she uttered the famous

taunt that nature had mistaken their sexes, for he ought to have been the woman. Her life was spared by her emperor-brother's clemency, though her large fortune was confiscated. Anna then entered the convent in Constantinople founded by her mother (Empress Irene, 1066-1120), and there wrote (in Greek) *The Alexiad*, indispensable for its picture of twelfth-century Byzantine life and culture, including medicine and nursing.—Edward Gibbon, *The Decline and Fall of the Roman Empire* (chap. xlviii) on Alexius I: "the same inconsistent principle of human nature enjoined the emperor to found a hospital for the poor and infirm, and to direct the execution of a heretic, who was burnt alive in the square of St. Sophia."—Princess Anna Comnena, *The Alexiad* (London, 1928), tr. by Elizabeth A. S. Dawes.—Important study by Georgina Buckler, *Anna Comnena* (Oxford, 1929).—Muriel Joy Hughes: *Women Healers in Medieval Life and Literature* (New York, 1943), pp. 37-41: "The Byzantine woman's chief function in the realm of healing, according to the chronicle, was to be nurse in the home. She performed alone whatever cures she could, and followed doctors' orders when she needed assistance . . . Anna also did her share of the nursing. Because she was so competent, she was slightly contemptuous of the diagnoses and services of the doctors."

ALEXIAN BROTHERS: Founded in the era of the Black Death (fourteenth cent.); patron, St. Alexius; mother house at Aix-la-Chapelle; established five American hospitals.—Annual reports of the Alexian Brothers Hospital (staffed by men only) of Chicago, Illinois.—Brother Hugh Miller, "The Alexian Brothers and Nursing," *Am. Jour. of Nursing* (1943), p. 374.

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ALPINE HOSPICES: Bernard of Menthon (923-1008), founder of the hospices of Saint Bernard; not to be confused with Bernard of Cluny (fl. 1150), author of *On Contempt of the World*, or with Bernard of Clairvaux (1091-1153), the most influential saint of Western Christendom.—J. E. Tyler, *The Alpine Passes in the Middle Ages* (Oxford, 1930); Walter Woodburn Hyde, *Roman Alpine Routes* (Philadelphia, 1935), and his article, "The Great St. Bernard Pass and its Hospice," *Isis*, xxvii (1937), 306-20.

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ANTHONY, SISTER (1812-97): Born Mary O'Connell at Limerick, Ireland.—J. F. Maguire, *The Irish in America* (1868); George Barton, *Angels of the Battlefield* (Philadelphia, 1897), pp. 40-48; Otto Juettner, *Daniel Drake and his Followers* (Cincinnati, 1909), pp. 411-20.—There are glimpses of Sister Anthony, who knew Billings when he was a student, in Fielding Hudson Garrison: *John Shaw Billings: A Memoir* (New York, 1915), pp. 12-14, 140.—Sister Mary Agnes McCann, *The History of Mother Seton's Daughters* (1917-23); Ellen Ryan Jolly, *Nuns of the Battlefield* (Providence, 1927), pp. 35-56; William Joseph Kerby in *Dictionary of American Biography* (1928), I, 318.

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1937); Julia Ottensen Flikke, *Nurses in Action* (Philadelphia, 1943).

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BAMBERG: Christian Pfeufer, *Geschichte des allgemeinen Krankenhauses zu Bamberg, von seiner Entstehung bis auf die gegenwärtige Zeit* (1825).

BARNARDO: Thomas John Barnardo (1845-1905) of Dublin, studying at the London Hospital as a missionary medical student, saw enough homeless and hopeless children in the East End to make it unnecessary for him to go to China. Barnardo's Homes ("No destitute child ever refused admission.") rescued and trained 59,384 waifs of the pavement and otherwise assisted 250,000 children in want (James Marchant).—J. H. Batt, *Barnardo, the Foster Father of Nobody's Children* (London, 1904).

BARTON, CLARA (1821-1912): Her writings are largely autobiographical.—*Clara Barton, In Memoriam* (Worcester, 1912).—Pertinent material in Mabel Thorp Boardman, *Under the Red Cross Flag* (Philadelphia, 1915).—Biographies by Percy Harold Epler (1915), Corra Bacon-Foster (1918), William Eleazar Barton (1922), Charles Sumner Young (1922), Mildred Mastin Pace (1941), and Blanche Colton Williams (1941).

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ence.—Robert James Carlisle, *An Account of Bellevue Hospital* (1893).—Elizabeth Christophers Hobson, *Recollections of a Happy Life* (1916), pp. 77-114, on the Bellevue school.—Anne Tjomsland, *Bellevue in France* (New York, 1941), anecdotal history of Base Hospital No. 1 in First World War.—Annual reports of the Bellevue Training School for Nurses.

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BIOGRAPHY: In contrast to the abundant material on medical men, the sources for biographies of nurses are extremely meager. What is needed is a "Dictionary of Nurses" which will avoid laudation, but give a forthright answer to the questions: What did this nurse accomplish, in what year, and what is the significance of her achievement? A single fact is worth a page of panegyric; in scientific biography the only religion is accuracy. When the first biographical lexicon of nurses comes to be compiled, it will be found that much useful information has already been lost. Several distinguished nurses refuse to reveal the year of their births, others never tell their full names. Despite the difficulties, considerable data can be salvaged from the files of national and local nursing organizations, letters and other documents, nursing publications, histories of hospitals and nursing schools, and memories of living nurses. The increasing popularization of medical history will probably lead to more biographies of eminent figures in the nursing world, in the manner of Ernest Poole's *Nurses on Horseback* about Mary Breckinridge (1932),

Robert Luther Duffus' *Lillian Wald* (1938), Helen Judson's *Edith Cavell* (1941), and Marvin Lowenthal's *Henrietta Szold* (1942).—The second edition of Meta Rutter Pen-nock's *Makers of Nursing History* (New York, 1940) is not documented, but contains over one hundred portraits and lively biographical sketches.

**BIRGITTA:** St. Bridget of Sweden (1303-73), a leading figure of the fourteenth century, chief saint of Scandinavia, founder of the Bridgittines. The information relating to Syon House, the only Bridgittine convent in England, "has been characterized as the most valuable record we possess of monastic life in the 15th century"—Lina Eckenstein, *Woman Under Monasticism*, pp. 383-97.—Publications of Early English Text Society of London include Bridgittine studies by John Henry Blunt, *Myroure of Oure Ladye* (1873) and William Patterson Cumming, *Revelations of Saint Birgitta* (1929).—See review by George Sarton, *Isis*, XXIII (1935), 450-52, with its tribute to Isak Collijn, director of Swedish libraries and foremost student of Birgitta.

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**BLACK, CATHERINE:** Sister Catherine Black, known as "Blackie," who first looked at life as "a little Irish girl in pigtails and a short gingham frock," who nursed paupers (London Hospital) and royalty (King George V), and whose experiences extended from casualty stations in German-devastated Belgium to the Australian bush, describes her career in *King's Nurse—Beggar's Nurse* (London, 1939).

**BOURNEVILLE, DÉSIRÉ-MAGLOIRE** (1840-1909): *Ecole municipale des Infirmières laïques de la Salpêtrière; Laïcisation de l'assistance publique* (1880-96), sixteen annual addresses by the physician who secularized hospital nursing in France.—Lavinia Lloyd Dock, "French provincial hospitals," *Am. Jour. of Nursing* (1908), pp. 384-89, an account of some of the difficulties in the

transition period of the laicization of French hospitals.—For biography of Bourneville, see Horace Bianchon: *Nos grands médecins d'aujourd'hui* (Paris, 1891), pp. 33-37; rédigé par Henry Labonne (the author used a pseudonym, the physician "Horace Bianchon" being a character in Balzac's *Comédie humaine*).

**BRECKINRIDGE, MARY:** Ernest Poole, *Nurses on Horseback* (New York, 1932); the work of the foundress of Frontier Nursing Service in the enigma of the Kentucky mountains as told to, and by, the author of *The Harbor*.

**BRIGIT:** St. Bridget of Kildare (453-523), or Brigit, Brigida, Brigid, Bride (Bridewell), Irish saint.—*Acta Sanctorum Bollandianam*, February 1, I, 99, 119, 950.—Whitley Stokes, *Three Middle-Irish Homilies on the Lives of Saints Patrick, Brigit and Columba* (Calcutta, 1874).—The sketch by Thomas Olden, *Dictionary of National Biography* (1886), VI, 340-42, contains additional bibliography.

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**BRITISH RED CROSS:** S. H. Best *The Story of the British Red Cross* (London, 1938).

**BROWN, CHARLOTTE BLAKE** (1846-1904): Henry Harris, *California's Medical Story* (San Francisco, 1932), pp. 214-18.

**BRUGES:** One of the landmarks of the Flemish city of Bruges is the Hôpital de St. Jean (patients admitted, A.D. 1188), containing the reliquary of St. Ursula and the principal Memlings (Hans Melinic, 1430-95).—Giliat Smith, *The Story of Bruges*, "Medieval Towns Series" (London, 1901).—Harold Murchison Tovell, "Notes on the Medical History of Bruges and the Hospital of Saint John," *Annals of Medical History* (1932), pp. 398-409.

**BURMA:** Gordon Stifler Seagrave, *Burma Surgeon* (New York, 1943). Among the achievements of this Burma-born Baptist, a medical graduate of Johns Hopkins (1921), were his training of native girls as nurses, his exploits with the U. S. Army Medical



Corps under General Stilwell in the historic retreat to India, his unforgettable services to China, and the writing of this best seller.

CABRINI, MOTHER: Francis Xavier Cabrini (1850-1917), baptized as Maria Francesca, founder of more than half a hundred schools and hospitals.—Pamphlet by E. J. McCarthy (Mother Cabrini League of Chicago, 1937).—Richard J. Purcell in *Dictionary of American Biography*, XXI, Supp. 1 (1944), pp. 146-48.—For a biography of the Italian nun who became the first North American saint, see Theodore Maynard, *Too Small a World: the Life of Mother Cabrini* (Milwaukee, 1945).

CANTEEN-WOMAN: The little classic of the *cantinière* was written by the Alsatian literary partners, Erckmann-Chatrian, *Madame Thérèse* (1863), of which there are innumerable editions.—Norah Hill: "The French Cantinière: Humble Forerunner of the Red Cross Nurse," *World's Health* (Geneva, 1924), pp. 378-80.

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CAVELL, EDITH (1865-1915): Writings of Miss Cavell in *The Hospital Supplement*, *The Nursing Mirror* (London, 1907-15).—Hugh Gibson: *A Journal from Our Legation in Belgium* (New York, 1917), pp. 345-62; Brand Whitlock, *Belgium: A Per-*

*sonal Narrative* (New York, 1919), II, 81-184; despite its egotism, and the author's preoccupation with his personal ailments, this work is such a clear exposure of the German mentality that, if its lesson had been heeded, Belgium would not have been sacrificed a second time.—Jacqueline Van Til, *With Edith Cavell in Belgium* (New York, 1922).—Streets, towns, rivers, mountains, watches, race-horses, nursing and social organizations, and a regiment, have been named after Edith Cavell; articles, poems, plays, motion-pictures and paintings are part of the Cavell saga. For a biography based on visits to the scenes connected with Miss Cavell's career and on information from her surviving relatives and friends in England and Belgium, see Helen Judson, *Edith Cavell* (New York, 1941).

CHAPTAL, MLE: Marguerite Paltier, *Made-moiselle Chaptal, ses principales activités sociales* (Paris, 1938), the record of a leader of French nursing by her secretary.

CHARITY: St. John Chrysostom (A.D. 340-407): "Sermon on Alms," delivered at Antioch after passing through the market place in the wintertime and seeing the paupers and beggars lying there neglected. Translated by Margaret M. Sherwood (N. Y. School of Philanthropy, *Studies in Social Work*, No. 10).—Juan-Luis Vives (1492-1540), Spanish scholar, whose *De disciplinis* (1531) is regarded as the most important Renaissance book on education, had previously written: "Concerning the relief of the poor, or concerning human need," a letter addressed to the senate of Bruges, January 6, 1526. Translated by Margaret M. Sherwood (*op. cit.*, No. 11).—Benjamin Kirkman Gray, *History of English Philanthropy* (London, 1905); F. R. Salter, ed., *Some Early English Tracts on Poor Relief* (London, 1926); Dorothy Marshall, *English Poor in the Eighteenth Century* (London, 1926).—Boris David Bogen, *Jewish Philanthropy in the United States* (New York, 1917); in memory of this social worker, B'nai B'rith planted a forest in Palestine); Ephraim Frisch, *Historical Survey of Jewish Philanthropy* (New York, 1924); the posthumous publication of Solomon Schechter (1850-1915), *Notes of Lec-*

*tures on Jewish Philanthropy* ("Studies in Judaism," 3rd series; Philadelphia, 1924).

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CLAYTON, S. LILLIAN (1874-1930): With impressive ceremonies a bronze tablet was unveiled to Miss Clayton during her life-

time, *Am. Jour. of Nursing* (1928), pp. 661-62; obituary tributes (*ibid.* (1930), pp. 679-88, 871-75).

COLOR: Raymond P. Sloan, *Hospital Color and Decoration* (Chicago, 1944) deals with the therapeutics of color; the hopeless bleakness of hospitals belongs to the past.

COLUMBA: Columba (521-97), Irish saint; variants of the name are Colum, Columcille, Columbanus, Columbia. He founded the celebrated monastery on Hy (Iona), one of the Hebrides, which thus became a holy island for countless pilgrims and the "Rome" of Celtic Christianity. Columba met approaching guests with a kiss, fed the poor, and aided the sick.—The standard *Vita Columbae*, by Adamnan (ca. 625-704), collated from the manuscripts by William Reeves, *Life of St. Columba* (Dublin, 1857).—Sketch by the physician Norman Moore in *Dictionary of National Biography* (1887), XI, 409-13.

COOK, EDWARD TYAS (1857-1919): Ardent Ruskinite, editor of the *Pall Mall Gazette* and other papers, leader-writer on the *Daily Chronicle*, Cook had never evinced any interest in sanitation, had never been inside a hospital, and knew nothing about nursing or its history. Yet he was selected by the Nightingale executors to write the official life of the founder of modern nursing. Cook undertook this surprising assignment, and plunged into forests of papers, for Miss Nightingale saved everything, even old blotters on which she had scribbled notes. The result proved that the executors could not have made a wiser choice. By his grasp of the subject as a whole and in its details, his incisive intelligence, his judicious mind, and his literary craftsmanship, Cook produced one of the great biographies of our time: *Life of Florence Nightingale* (London, 1913).—J. Saxon Mills, *Sir Edward Cook* (London, 1921).

DARCHE, LOUISE: Lavinia Lloyd Dock, "Louise Darche, a Reformer in Nursing and in the Civil Service," *Trained Nurse and Hospital Review* (1899), pp. 195-201.

DEACONESS: Phoebe (Romans 16:1-2) was the earliest known deaconess, an order upheld in the councils of Nicaea (325) and



Chalcedon (451), but opposed by male jealousy in the councils of Orange (441) and Epaone (517); the order was revived in modern times by the Protestant pastor of Kaiserswerth-on-the-Rhine, Theodor Fliedner (1833); the first president of the London Deaconess Institution, Elizabeth Ferard, was the earliest English deaconess (1861).—J. S. Howson: *Deaconesses* (London, 1862); John Malcolm Ludlow, *Woman's Work in the Church* (London, 1865); Henry Codman Potter: *Sisterhoods and Deaconesses at Home and Abroad* (New York, 1873); Christian Golder, *History of the Deaconess Movement* (Cincinnati, 1903).

DELANO, JANE ARMINDA (1862-1919): Edna Louise Foley, "Last Honors," *Am. Jour. of Nursing* (1919), pp. 688-92, followed by tributes; Mary E. Gladwin, *The Red Cross and Jane Arminda Delano* (Philadelphia, 1931), pamphlet; Mary A. Clarke, *Memoirs of Jane A. Delano* (New York, 1934), pamphlet.

DENMARK: Leading figures in the development of Danish nursing include the Crown Princess Louise (1863), Sisters Louise Martinie Laurette Conring and Sophie Zahrtmann, the physicians Carl Emil Fenger (1876) and Theodor Martinus Trautner (1881), and the nurses Isabella Brochenhuus Lawenhjelm (1886), Charlotte (Harbou) Norrie, Mrs. Henny Tscherning, Bodil Hellfach, Cecilie Lütken, and Charles Munck.—Charlotte Norrie, "Nursing in Denmark," *Am. Jour. of Nursing* (1900), pp. 183-87; Cecilie Lütken, "Berufskrankenpflege in Dänemark," *Zeitschrift für Krankenpflege* (Berlin, 1903), pp. 106-10.—The official journal of nursing is *Tidskrift for Sygepleje* (Copenhagen, founded 1901).—Denmark joined the International Council of Nurses (1909), and the Danish nurse, Christiane Reimann, was appointed secretary of the council and editor of the *International Nursing Review*.

DICKENS, CHARLES (1812-1870): The son of a prodigal father who was jailed for debt, Charles Dickens knew hardship and humiliation in his boyhood, but before his youth was over he was recognized as the most popular writer of the Victorian era. The queen herself expressed the opinion of

the time when she presented to Dickens a copy of her book, *Leaves from a Journal of Our Life in the Highlands*, with the inscription: "From one of the humblest of authors to one of the greatest." To the many readers who could hardly wait for the monthly installments of a Dickens story, he was a cult, a literary demigod, the greatest writer of fiction in the English language, and such he evidently remains to an extraordinary number of admirers. He must have struck others as a half-educated cockney who mistook the giving of peculiar names to his brain children and the constant repetition of comic catchwords as the basis of humor; a *farceur* rather than a novelist, for he could not create characters but only caricatures of characters.

From January 1843 to July 1844 there ran through the press in monthly numbers the seventeenth book by Charles Dickens: *The Life and Adventures of Martin Chuzzlewit* (1844), dedicated to the celebrated philanthropist, Miss Burdett-Coutts. This work is significant for our subject because it depicts Sairey Gamp and Betsey Prig, who immediately entered into the life and language of England as specimens of the professional nurse of the period. Various Gampian mannerisms were taken from actual occurrences; for example, "she sat down so close to the fender (which was a high one) that her nose rested upon it; and for some time she drowsily amused herself by sliding that feature backwards and forwards along the brass top" (chap. xxv). This trick was told to Dickens by a well-bred lady who had observed it in an old nurse whom she had hired to attend a beloved invalid (John Forster, *Life of Dickens*, II, 30). When the novelist makes Sairey Gamp take the pillow from beneath the head of an unconscious patient to soften her own armchair, he was neither exaggerating nor drawing upon the Dickensian imagination, for at that time, and for years later, numerous night nurses were found asleep before the fire, with blankets and pillows appropriated from the patients they were believed to be watching.

"In all my writings," stated Dickens, "I hope I have taken every available opportunity of showing the want of sanitary im-



provements in the neglected dwellings of the poor. Mrs. Sarah Gamp was, four-and-twenty years ago, a fair representation of the hired attendant on the poor in sickness. The hospitals of London were, in many respects, noble Institutions; in others, very defective. I think it not the least among the instances of their mismanagement, that Mrs. Betsey Prig was a fair specimen of a Hospital Nurse; and that the Hospitals, with their means and funds, should have left it to private humanity and enterprise, to enter on an attempt to improve that class of persons—since, greatly improved through the agency of good women.”

Old Martin Chuzzlewit finally suggested to Mrs. Gamp “the expediency of a little less liquor, and a little more humanity” (chap. lii). The bottle was both the solace and the curse of the old-time nurse. A decade after the publication of *Martin Chuzzlewit*, an anonymous study (known to be the work of Mary Stanley) appeared under the title of *Hospitals and Sisterhoods* (London: John Murray, 1854). It recorded the reactions of physicians and hospital superintendents to the nurses of their time. “If I can but obtain a sober set,” wrote one, “it is as much as I can hope for.” Another answered: “I enquired for Dr. X. about the character of the nurses, and he says they always engage them without any character, as no respectable person would undertake so disagreeable an office. He says the duties they have to perform are most unpleasant, and that it is little wonder that many of them drink, as they require something to keep up the stimulus.” Even Florence Nightingale in the Crimea was obliged to supervise the liquor supply of her nurses who were making history. Society approved of inebriety among nurses. “The nurses are very good now,” remarked Lady Palmerston; “perhaps they do drink a little, but so do the ladies’ monthly nurses, and nothing can be better than them: poor people, it must be so tiresome sitting up all night.” As Lord Granville said, “Lady Pam thinks the Nightingale Fund great humbug.”

For chapter on “Charles Dickens and Nursing Reform,” see Sarah Tooley. *The History of Nursing in the British Empire* (London, 1906), pp. 45-55: “The next im-

portant event which followed the efforts of Elizabeth Fry in nursing reform, was the publication of *Martin Chuzzlewit*, which struck a blow at the hireling nurse. Fiction and caricature have played an important part in social history by focusing abuses in so strong a light that men and women were compelled to look and condemn. Sairey Gamp and Betsey Prig, the immortal examples of the private and hospital nurse of fifty and sixty years ago, have played an incalculable part in revealing the low status of nursing in the good old times, and to their creator belongs an honored place in the roll of early nursing reformers. What *Uncle Tom’s Cabin* was to the abolition movement, *Martin Chuzzlewit* was to nursing reform.”

The muse of Dickens functioned in an atmosphere of squalor, and it wallowed in the repulsive bodies and revolting habits of Sairey Gamp and Betsey Prig. These names have become synonyms of the old-time type of nurse and no lecturer or writer on the history of nursing would think of passing them by without notice. Theirs is the immortality engendered of disgust.

DIMOCK, SUSAN (1847-75): Lida T. Rodman in the Kelly-Burrage *Dictionary of American Medical Biography* (New York, 1928), p. 329.

DIX, DOROTHEA LYNDE (1802-1887): Her numerous memorials to state legislatures and the federal government should be read as part of her remarkable biography.—Francis Tiffany, *Life of Dorothea Lynde Dix* (Boston, 1890); Helen E. Marshall, *Dorothea Dix, Forgotten Samaritan* (Univ. North Carolina Press, 1937).

DORA, SISTER: Born Dorothy Wyndlow Pattison (1832-78).—Margaret Lonsdale, *Sister Dora* (London, 1880), several editions.—The bitter autobiography of her brother, Mark Pattison, *Memoirs* (1885).—G. C. Boase in *Dictionary of National Biography* (1895), XLIV, 57-58.

DROWN, LUCY LINCOLN (1848-1934): Sketch in *Am. Jour. of Nursing* (1934), pp. 841-42.

DUNANT, JEAN HENRY (1828-1910): *Un Souvenir de Solferino* (Geneva, 1862), tr.



Mrs. David H. Wright, as *The Origin of the Red Cross* (Philadelphia, 1911).—The founder of the Red Cross (he signed himself J. Henry Dunant, not Henri) has no biographical paragraph in the *Encyclopaedia Britannica*, and such is his obscurity that so competent a writer as Sir Edward Cook (*Life of Florence Nightingale*, II, 205) referred to him as "a Swiss physician," though Dunant had never even contemplated the study of medicine.—René Sonderegger, *Jean Henry Dunant, Revolutionär!* (Zurich, 1935), with facsimiles of original letters and documents. Under the frontispiece of Dunant appears his credo in his handwriting: "Ecrasons les 2 infâmes. Les deux grands ennemis de l'Humanité, savoir: l'Etat et l'Eglise sont la source intellectuelle et morale de tout esclavage; ce sont deux engrenages arbitraires: le premier brutalement machiavélique est hypocritement despotique; le second, tartufe endurci, pharisien bouffi de morgue, est tyranniquement fanatique." (Let us crush the two infamies. The two great enemies of Humanity, to wit, the State and the Church, which are the intellectual and moral source of all enslavement; they are the two arbitrary cogwheels; the first brutally machiavelian and hypocritically despotic; the second, a hardened Tartufe, a bloated Pharisee of the morgue, is tyrannically fanatic)—Martin Gumpert's biography of Dunant, translated by Whittaker Chambers (New York, 1938), is the most valuable study available in English, but unfortunately contains too much extraneous material; the author prepared a well-illustrated synopsis of his book for *Ciba Symposia* (Summit, N. J.) IV (1942), 1361-92.

ELIOT, GEORGE (1819-1880): "I had a note from Miss Florence Nightingale yesterday," wrote George Eliot (July 1852); "I was much pleased with her. There is a loftiness of mind about her which is well expressed by her form and manner." Some years later, George Eliot wrote (Feb. 1859): "Thank you for sending me that authentic word about Miss Nightingale. I wonder if she would rather rest from her blessed labors, or live to go on working. Sometimes when I read of the death of some great sensitive human being, I have a triumph in the sense that they are at rest; and yet, along with

that, deep sadness at the thought that the rare nature is gone forever into the darkness."

It was an age of innocence when a brief sojourn in Italy could arouse an author to write a novel on the period of Savonarola. George Eliot visited Florence for a fortnight in 1860, and the following year came back for a month. The result was *Romola*, which first appeared in *Cornhill Magazine* (July 1862-Aug. 1863), and then in book form (1863). The book was an enormous success. *Romola* marries Tito Melema, and after this dark, handsome, curly-haired villain is finally choked to death by the old man he betrayed and ruined, *Romola* goes down into the valley and nurses the victims of a plague: "In this way days, weeks, and months passed with *Romola* till the men were digging and sowing again, till the women smiled at her as they carried their great vases on their heads to the well, and the Hebrew baby was a tottering tumbling Christian, Benedetto by name, having been baptized in the church on the mountain-side. . . . Many legends were afterwards told in that valley about the blessed Lady who came over the sea, but they were legends by which all who heard might know that in times gone by a woman had done beautiful loving deeds there, rescuing those who were ready to perish."

EMANCIPATION OF WOMAN: "Social progress can be measured with precision by the social position of the female sex" (Karl Marx, 1868). The modern nursing movement was impossible until the emancipation of woman gave her educational and economic rights. Out of the vast sea of literature on the subject, the following are a few of the important landmarks: Mary Wollstonecraft, *A Vindication of the Rights of Woman* (London, 1792); John Stuart Mill, *The Subjection of Women* (London, 1869); Hubertine Auclert, *Le droit politique des femmes* (Paris, 1878); August Bebel, *Die Frau und der Socialismus* (Zurich, 1883), which was translated into various languages including English (New York, 1910).—See articles on "Woman," with bibliography, in *Encyclopaedia of the Social Sciences* (1935), XV, 439-65.



ETHIOPIA: R. Young, "Medicine and Nursing in Ethiopia," *Lancet* (London, 1944), I, 797-98.

EVON, AGNES: Mabel S. C. Smith, "An American Nurse in Beirut," *Am. Jour. of Nursing* (1928), pp. 145-46.

FACULTY: *The Nursing School Faculty* (National League of Nursing Education, 1933).

FARQUHARSON, MARTHA (1846-1929): Grace Douglas in *International Nursing Review* (1930), p. 72.

FISHER, ALICE (1839-88): Marion E. Smith, "The Pioneer Work of Alice Fisher in Philadelphia," *Am. Jour. of Nursing* (1904), pp. 803-08; Ruth E. Rives, "The Passing of Old Blockley," *ibid.* (1927), pp. 747-49.

FLIEDNER, THEODOR (1800-64): The founder of the Protestant deaconess movement (1836) edited a periodical, *Der Armen und Kranken Freund*, in which appeared the annual almanac of the Kaiserswerth institution, the nursing shrine to which came such pilgrims as Elizabeth Fry, Florence Nightingale, Agnes Jones, and in later years Lavinia Lloyd Dock (*Short Studies on Nursing Subjects*; New York, 1900) and Mrs. Bedford Fenwick (*History of the International Council of Nurses*; Geneva, 1931).—*Life of Pastor Fliedner*, tr. Catherine Winkworth (London, 1867); Georg Fliedner, *Theodor Fliedner, kurzer Abriss seines Lebens und Wirkens* (Kaiserswerth, 1886-92).—"Life of Gertrude Reichardt, the first Kaiserswerth deaconess," in *Der Armen und Kranken Freund* (1869); of Friederike Münster, Fliedner's first wife and first superintendent; and of Caroline Bertheau, Fliedner's second wife and long-time superintendent, in *Jahrbuch für Christliche Unterhaltung* (1894).

FOUNDLING HOSPITALS: Before the twelfth century, asylums for foundlings were established at Milan (by Archbishop Datheus, 787), Bergamo (982), Laibach (1041), and Padua (1097). Foundling asylums were included in the subsequent hospital movements of Guy of Montpellier and Innocent III. The history of the European hospitals

for children was written by Franz Seraph Hügel, *Die Findelhäuser und das Findelwesen Europas* (Vienna, 1863).—Abraham Jacobi, *The Raising and Education of Abandoned Children in Europe* (Bellevue Printing Office, 1870).—For the New York Foundling Asylum (1869), see sketch of its originator, Sister Irene (1823-96), by Anna T. Sadlier, *The Mother of the Foundlings* (Ave Maria, Notre Dame, Ind., 1896), pp. 449-55; the tribute by James Joseph Walsh, *History of Nursing* (New York, 1929), pp. 212-15; and the article by William Bristol Shaw in *Dictionary of American Biography* (1932), IX, 498-99.—The answer to the tragedy of the baby in the foundling hospital is adoption, as was recognized by the educator Clara B. Spence (1862-1923), whose work was carried on by the Spence Alumnae Association. On this subject see Eleanor Garrigue Gallagher, *The Adopted Child* (New York, 1936).—For the model adoption nursery, established in Evanston, Illinois, and known as "The Cradle" (1923), see article by Florence Dahl Walrath, *Encyclopaedia Britannica* (1943), IX, 560.

FRANCE: For nursing in France, see under "Bourneville"; "Canteen-Woman"; "Chaptal"; "Fronde"; "Hôtel-Dieu"; "Vincent de Paul."—Aside from the *Gravediggers of France*, by Pertinax, two books are necessary for an understanding of the disease of Vichy-France: Elliot Paul, *The Last Time I Saw Paris* (1942), the sweetest and saddest of books; and Charles Odic, *Stepchildren of France* (1945), the unbelievable that happened in the Land of Liberté, Egalité, Fraternité, as observed and related by a French physician, member of an old Catholic family of Brittany; tr. Henry Noble Hall.

FRANCIS OF ASSISI (1182-1226): Paul Sabatier (1858-1928) was expelled from Strasbourg for refusing to become a German subject, but after the city was liberated he returned as professor of theology (1919). This French Protestant was one of the foremost of Franciscans, establishing the International Society of Franciscan Studies, organizing *La Refezione Scolastica* at Assisi, and writing the famous *Vie de St. François*,



at once translated (New York, 1894) by Louise Seymour Houghton; unfortunately the biography is unnecessarily aggressive in tone and overemotionalized for the modern taste. There are numerous other lives, but the best biography is the study of Francis's own writings, Englished by Paschal Robinson (Philadelphia, 1906).—Havelock Ellis, *Affirmations* (1898); Andrew George Little, *A Guide to Franciscan Studies* (London, 1920); Emma Gurney Salter, "Sources for the Biography of St. Francis," *Speculum*, V (1930), 388-410; George Sarton, *Introduction to the History of Science* (1931), II, 543-45.

FRONDE, THE: Alphonse Feillet: *La misère au temps de la Fronde et de Vincent de Paul* (Paris, 1862), a chapter in the history of pauperism and early welfare work in France.

FULLER, THOMAS (1654-1734): English physician, notable for his pioneer description of the qualifications of a sick nurse, *Exanthemologia* (1730), p. 208.—Sketch by Norman Moore in *Dictionary of National Biography* (1889), XX, 320-21.

GEORGIA: Georgia State Nurses Association, *Silver Jubilee Year Book, 1907-1931*.

GERMANY: The letters of Julia Catherine Stimson, as an American army chief nurse in a British hospital in France, relate the experiences of a member of the Royal Army Medical Corps: "At German towns through which the train passed . . . it frequently happened that women in Red Cross uniforms came to the stations and offered the prisoners cups of tea or milk and held them to their lips, only to snatch them away again and jeer and call them Schweinhund. . . . He said he never in all his hospital experience has seen such emaciation from either cancer or tuberculosis as he saw among the prisoners there who were starving. He saw men kiss the shoes of their guards and beg like babies for bread." *Finding Themselves* (New York, 1918), pp. 16-19. The passage is important, because it demonstrates that the German violation of the Red Cross and the *Schweinhund* motif were established in the first World War; it forecasts the Second World

War, in which the German representatives of the sacred Healing Art became supervisors of gas chambers and crematoria, conductors of experiments in starvation and freezing, injectors of disease germs and death serums, and experts in transforming human corpses into boxes of soap. The technical knowledge of German professors and German physicians and German nurses played a prominent part in the desecration (sewing up the genitals of pregnant women, until their bodies burst asunder), terrorization (plastic surgery for the production of monstrosities) and extermination (lethal fumes) of six million innocent victims. In these unparalleled annals of mass torture and mass murder, not a single case is known of a Brown Skirt (German nurses who wore a brown uniform) who stretched out her hand in mercy to a dying mother or a child about to perish. The record of the German Red Cross is a record of racial hatred and ghoulish cruelty, and never should it be permitted to function again. It would be criminal to forget that Irmgard Huber, the murderous nurse at the Hadamar Asylum, and the nurse Irma Grese, known as the "Beastess of Belsen," were trained nurses of modern Germany.

GILSON, HELEN LOUISE: William Howell Reed, *Hospital Life in the Army of the Potomac* (Boston, 1866), description of Miss Gilson's service at the Colored Hospital of City Point.—Linus Pierpont Bockett and Mary Vaughan, *Woman's Work in the Civil War* (Philadelphia, 1867), pp. 133-48; Mary Gardner Holland, *Our Army Nurses* (Boston, 1895), pp. 534-44; Adelaide Smith, *Reminiscences of an Army Nurse During the Civil War* (New York, 1911), pp. 107-09.

GONZAGA, SISTER MARY: Born Mary Agnes Grace (1812-97).—George Barton, *Angels of the Battlefield* (Philadelphia, 1897), pp. 104-25; her journal, edited by Sarah Trainor Smith (American Catholic Historical Society, Dec. 1897), included in Eleanor C. Donnelly, *Life of Sister Mary Gonzaga* (Philadelphia, 1900). The work of her community in the Civil War is described by Ellen Ryan Jolly, *Nuns of the Battlefield* (Providence, 1927), pp. 57-84.



## GREECE:

HOMER, *Iliad*, vi, 389 ff. (quoted in text, p. 18); xxii, 503 ("and when sleep came upon him and he ceased from his childish play, then would he slumber on a couch in the arms of his nurse"); *Odyssey*, i, 429 (first reference to true-hearted Eurycleia, quoted in text, p. 18); ii, 361 ("the dear nurse, Eurycleia"); iv, 472 ("Then the good nurse Eurycleia . . ."); xvii, 31; xix, 15, 21, 357, 466 ff. (Eurycleia, bathing the feet of Odysseus who has returned from his long wanderings in the guise of a beggar, is the first to recognize him by his scars); xx, 128, 134, 148; xxi, 380, 381; xxii, 391, 394 (The aged Eurycleia has charge of the many women servants.); 480-84 ("But Odysseus said to the dear nurse Eurycleia, Bring sulphur, old dame, to cleanse from pollution, and bring me fire, that I may purge the hall"); xxiii, 1-177 (Eurycleia is the first to inform the unbelieving Penelope that the stranger is Odysseus himself; in a remarkable passage, Homer contrasts the nurse's eager desire to bring the joyful news to her mistress with the disability of her years: "Her knees moved nimbly, but her feet stumbled beneath her").

LATER SOURCES: Hesiod, *Theogony*, 450, 485. Quoted in text, p. 23.—Herodotus, vi, 61. Referred to in text, p. 18.—Sophocles, *Philoctetes*, 704 ("Like some weak infant parted from its nurse . . .").—Euripides, *Medea*, 54-55 (Nurse: "The hearts of faithful servants are touched by the misfortunes of their masters.").—Hippocrates, *De corporum*, xvii. Quoted in text, p. 21.—Plato, *Laws*, 790A. Quoted in text, p. 19.—Aristotle, *Historia animalium*, 586-87 ("The cutting of the navel-string, which is the nurse's duty, is a matter calling for no little care and skill. . . . And the warmer the milk of the nurse, so much the quicker will appear the teeth of the children."); *Politics*, 1254, 1259. Quoted in text, p. 22.—Theocritus, *Idylls*, ii, 70 ("Now the Thracian nurse of Theucharidas that dwelt next door . . ."); xxiv, 6 (lullaby of Alcmena, referred to in text, p. 21).—Vitruvius, *De architectura*, iv, i, 9 (a young girl of Corinth died, and her nurse carried a tile-covered basket to the top of her monument, placing it on an acanthus root; in the

spring, the weight of the basket caused the leaves and shoots of the acanthus to form the volutes at the extreme parts, this being the origin of the slender, maiden-like Corinthian columns).—Plutarch, *Lycurgus*, xvi; Quoted in text, p. 19, *Alcibiades*; *Consolation to Apollonius*, 22 (Ion, the tragedian: "Your blooming children's nurse").

QUOTATIONS: The majority of the quotations (a few revised by the present writer) are from the beloved Loeb Classical Library. Although high-hatted by some scholars, this is a reliable and convenient series (published in Great Britain, William Heinemann; in America, Harvard University Press). Embodying the results of recent investigations, in bilingual text and uniform binding (green for Greek authors, red for the Latin), the several hundred volumes of the Loeb Classical Library constitute a depository of the literary heritage of antiquity.—For Aristotle, the Oxford University Press edition; for Plutarch's *Moralia*, the edition prefaced by Ralph Waldo Emerson (Boston, 1870).

STUDIES: Alice Walton, *The Cult of Asklepios* (Cornell Studies in Classical Philology, 1894); Edward Theodore Withington, *Medical History from the Earliest Times* (London, 1894), p. 80; Richard Caton, *The Temples and Ritual of Asklepios at Epidaurus and Athens* (reprinted from *Otia Merseiana*, 1899); M. Brenning, "Ausländische Krankenpflege" (*Zeitschrift für Krankenpflege*, Berlin, 1905), pp. 53-57, 102-107; A. C. Wootton, *Chronicles of Pharmacy* (London, 1910), II, 221; Sister Mary Rosaria, *The Nurse in Greek Life* (Boston, 1917), an important thesis, dealing with the status of the domestic nurse in ancient Greece; Walter Addison Jayne, *The Healing Gods of Ancient Civilizations* (Yale University Press, 1925), p. 326.—A study of the sources, and the monographs derived from them, confirms the view of our text that the nurse of Greece was not a trained nurse.

GREGORY OF NAZIANZUS (ca. 329-ca. 389): Sister Mary Emily Keenan, "St. Gregory of Nazianzus and Early Byzantine Medicine," *Bulletin of the History of Medicine*, IX, (1941), 8-30.—Gregory's reference to nurses, *Orations* 18, 30.



GROUP HOSPITALIZATION: Clarence Rufus Rorem, *Non-Profit Hospital Service Plans* (American Hospital Association, 1940).

HAESER, HEINRICH (1811-85): *Dissertatio de cura aegrotorum publica a christianis oriunda* (Gryphiswaldiae, 1856); *Geschichte christlicher Krankenpflege und Pflegerschaften* (Berlin, 1857); our text is indebted to the latter work for information on the obscure Sisters of St. John's Order.

HAGIWARA, TAKE (1873-1936): Obituary notice of the president of the Nurses Association of the Japanese Empire, *International Nursing Review* (1936), pp. 237-38.

HAMILTON, ANNA (1864-1935): *Considerations sur les infirmières des hôpitaux* (Montpellier, 1900); "War Service of the Graduates of the Protestant Hospital, Bordeaux, France," *Am. Jour. of Nursing* (1919), pp. 507-13; portrait and obituary, *ibid.* (1935), pp. 1208-09.—Meta Rutter Pennock, *Makers of Nursing History* (New York, 1940), pp. 132-33.

HAMPTON, CAROLINE: William George MacCallum, *William Stewart Halsted* (Baltimore, 1930), with portrait and recollections of Caroline Hampton.

HAMPTON, ISABEL ADAMS (1860-1910): Wife of the gynecologist Hunter Robb.—Memorial services, *Johns Hopkins Hospital Bulletin* (1910), pp. 251-57; memorial sketches, *Am. Jour. of Nursing* (1910), pp. 9-38, where see especially the recollections of Miss Dock.

HEALTH INSURANCE: Isidore Sydney Falk, *Security Against Sickness* (New York, 1936).

HEDWIG OF SILESIA: St. Hedwig (1174-1243), patron saint of Silesia, social worker and nurse, who attended leprous women "with the solicitude of a mother."—*Acta sanctorum Bollandiana*, October 17.—Adolf von Wolfskron, *Die Bilder der Hedwigslegende* (Vienna, 1846); iconography of Hedwig.—Rudolf Virchow, *Zur Geschichte des Aussatzes und der Spitäler, besonders in Deutschland* (Berlin, 1860).—For an English summary of the work of Hedwig, see Lina Eckenstein, *Woman under Monasticism* (Cambridge, 1896), pp. 291-99.

HENLEY, WILLIAM ERNEST (1849-1903): In the winter of 1875, Leslie Stephen, that amazing man who lived a score of lives, visited a patient in the Old Infirmary of Edinburgh ("half-workhouse and half-jail"). Leslie Stephen, who had climbed Mount Blanc and the Jungfrauoch, and once walked in twelve hours the fifty miles from Cambridge to London to be present at a dinner, saw before him a young man who could not walk at all. (One foot had been amputated long before because of tuberculosis; and later, when the doctors declared it would be necessary to amputate the other, William Ernest Henley, the indomitable cripple, made his way to Edinburgh to place himself under the care of a Quaker surgeon, whom many doctors of the time called not a Quaker but a quack, named Joseph Lister; the skill of Lister finally saved Henley's remaining limb.) Leslie Stephen looked at the bearded and boisterous invalid whose magnificent head (Rodin was to cast it in bronze) was topped with bushy, tangled, yellow hair, growing straight up. The sick man overflowed with vitality, and in his short-sighted, blue eyes shone an unquenchable thirst for life. Leslie Stephen departed, but soon returned with another recruit in the far-stretching army of tuberculosis, a tall, thin-legged, thin-chested youth, who had never known normal health; he too loved life and adventure, and had already signed "R.L.S." to certain manuscripts. The sick man in the bed and his sick visitor began talking, and their conversation, their friendship, and their subsequent quarrel, have become part of the literary history of the nineteenth century.

In the year that Henley made the acquaintance of Leslie Stephen and Robert Louis Stevenson, he wrote one of the most-quoted poems in the English language, ("Out of the night that covers me"). Henley's confinement in the Old Infirmary had momentous consequences for literature, for he produced a sheaf of poems while there and later confessed that "they had long since been rejected by every editor of standing in London—I had well-nigh said in the world; but as soon as Mr. Nutt had read them, he entreated me to look for more; I did as I was told." The result was the un-

forgettable section entitled "In Hospital," the opening series in *A Book of Verses* (London: David Nutt, 1888). No other poems in the English language portray with such vivid power the patient's reaction to his surroundings in the hospital, to operation, other patients, types of nurses, surgeons, the endless waiting, and the wild joy of discharge. The first edition is difficult to obtain, but subsequent issues belong in every library of nursing.

**HILDEGARD OF BINGEN (1098-1179):** Contemporary lives by the monks Guibert, Godefrid, and Theodoric; her *Works* in Volume CXC VII of *Patrologia Latina* (Paris, 1855) of the priest-publisher, Jacques-Paul Migne and in Volume VIII of *Analecta Sacra* (Monte Cassino, 1882) of the French cardinal, Jean-Baptiste Pitra. Several German studies listed in George Sarton, *Introduction to the History of Science* (1931), pp. 386-88.—Charles Singer, "Scientific views and visions of Hildegard," *Studies in the History and Method of Science* (1917), pp. 1-55, elaborately illustrated with illuminated plates from the Wiesbaden Codex and the Lucca ms.—Lynn Thorndike, *History of Magic and Experimental Science* (1923), II, 124-54.

**HIRSCH, MAURICE DE (1831-96):** During the Russo-Turkish war (1878), Hirsch established and maintained hospitals for both armies, and sent the czarina a fortune for charitable purposes. An unstinted and extraordinarily successful patron of the English turf, he gave all his winnings to the hospitals, saying he raced "for the London hospitals." He lost his only son, the gifted Lucian, and answered a letter of condolence with the memorable words: "My son I have lost, but not my heir; humanity is my heir." His life fulfilled these words, for the baron and his philanthropic wife, Clara de Hirsch (1833-99), devoted their energies and wealth to the amelioration of suffering.—Oscar S. Straus in *Jewish Encyclopedia* (1904), VI, 414-16; Lucien Wolf in *Encyclopaedia Britannica* (1910), XIII, 524-25.

**HISTORY:** The standard histories of the following subjects were written in German: anatomy (Ludwig Choulant), Arabian medi-

cine (Ferdinand Wüstenfeld), bacteriology (Friedrich Loeffler), balneology (Alfred Martin), botany (E. H. F. Meyer), cancer (Jakob Wolff), chemistry (Hermann Kopp), epidemics (Georg Sticker), folk-medicine (Havorka-Kronfeld), geographical pathology (August Hirsch), gynecology (Franz von Winckel), Homeric medicine (Hermann Frölich), hygiene (Karl Sudhoff), Jewish medicine (Julius Preuss), medicine (Heinrich Haeser), military medicine (Wilhelm Haberling), neurology (Max Neuburger), obstetrics (Heinrich Fasbender), ophthalmology (Julius Hirschberg), otology (Adam Politzer), pharmacy (Hermann Schelenz), prostitution (Iwan Bloch), psychiatry (Heinrich Lachr), surgery (Ernst Julius Gurlt), toxicology (Louis Lewin).

The situation is different with nursing, for the standard history of nursing, and the only important survey of the whole field, was written in English, and its first two volumes were translated into German (by Sister Agnes Karll). The work, honored for over a generation by all students of the subject, is by Mary Adelaide Nutting and Lavinia Lloyd Dock, *A History of Nursing* (New York; Vols. I-II, 1907; Vols. III-IV, 1912). This noble production was condensed by Lavinia Lloyd Dock and Isabel Maitland Stewart, *A Short History of Nursing* (New York, 1920), which is by far the best of the one-volume histories of nursing.—An earlier study, Sarah Tooley's *The History of Nursing in the British Empire* (London, 1906), has numerous interesting features based on first-hand information. Other one-volume histories of nursing were written by Minnie Goodnow (1916), James Joseph Walsh (1929), Lucy Ridgely Seymer (1932), Agnes E. Pavey (1938), Elizabeth Marion Jamieson with Mary Sewall (1940), and Deborah MacLurg Jenson (1943).—What is now needed is a series of research monographs on special problems in the history of nursing.

**HOME, THE:** Mary L. Habel and Hazel D. Milton, *The Graduate Nurse in the Home* (Philadelphia, 1939).

**HOPKINS, JULIET ANN OPIE (1818-90):** Thomas Cooper DeLeon, *Belles Beaux and Brains of the 60's* (New York, 1909); Hallie



Farmer in *Dictionary of American Biography* (1932), IX, 214.

HOSPITALISM: Sir James Young Simpson (1811-70), *Hospitalism* (Edinburgh, 1869), included in his collected *Works* (1871-72), II, 289-405.

HOSPITAL LIBRARIES: Perrie Jones, *One Thousand Books for Hospital Libraries* (University of Minnesota, 1944), annotated bibliography, 58 pages.

HOSPITALS: Robert de Balsac (ca. 1485), "L'Hôpital," published as the final chapter of Symphorien Champier's *The Cloister of Princes* (Lyons, 1503), translated by Michel Pijoan (*Bulletin of the History of Medicine*, Johns Hopkins University), I (1933), 118-25, a brief and bitter summary of the types of persons who ultimately find refuge in the hospital. For example, "The people who spend much more than they are really worth, had better die." And in conclusion: "There are vagabonds, churls, huff-capped squires and rogues, stealers of valuable time, who cannot think for themselves and always present themselves inconveniently, who never realize what might happen, the dangers of life, who have no idea of death, these and many others are the principal inmates of the hospital together with those whom I have just named in the preceding parts. These people have not the remotest idea of how to live. All those who do contrary to a balanced and intelligent state will probably be seen in the hospital."—William Petty, *Essays in Political Arithmetick, concerning the People, Housing, Hospitals* (London, 1686), by the pioneer of the science of comparative statistics.—John Aikin, *Thoughts on Hospitals* (London, 1771), by the physician-scholar, literary executor, and biographer of John Howard, whose own books on the subject are bitter classics.

The more modern writers on the subject include: Christian Pfeufer, *Geschichte des allgemeinen Krankenhauses zu Bamberg* (Bamberg, 1825).—Heinrich Haeser, *Dissertatio de cura aegrotorum publica a christianis oriunda* (Gryphiswaldiae, 1856), *Geschichte christlicher Krankenpflege und Pflegerschaften* (Berlin, 1857).—Daniel Golden Thomas, "History of the Founding

and Development of the First Hospitals of the United States," *American Journal of Insanity* (1867-8), pp. 130-54.—James Young Simpson, *Hospitalism* (Edinburgh, 1869), a protest against the evils of large hospitals in his day, reprinted from the *Edinburgh Medical Journal*.—"Pre-Christian Dispensaries and Hospitals," *Westminster Review* (1877), pp. 206-15.—Walker Gill Wylie, *Hospitals, their history, organization, and construction* (New York, 1877).—Rudolf Virchow, "Zur Geschichte des Aussatzes und der Spitaler," *Archiv für pathologische Anatomie und Physiologie, und für klinische Medizin* (1860-61), in 4 parts; see Volume II of his collected essays on public medicine and epidemics, *Gesammelte Abhandlungen aus dem Gebiete der Oeffentlichen Medizin und der Seuchenlehre* (Berlin: August Hirschwald, 1879).—William Gilman Thompson, *Training Schools for Nurses* (New York, 1883).—Edward Cowles, "Hospitals," *Reference Handbook of the Medical Sciences* (1886), III, 699-723.—Henry Charles Burdett, *Hospitals and Asylums of the World* (London, 1893), 4 vols. and portfolio.—Casimir Tollet, *Les edifices hospitaliers depuis leur origine jusqu'à nos jours* (Paris, 1892); *Les hôpitaux modernes au xix siècle* (1894).—John Shaw Billings and Henry Mills Hurd, eds., *Hospitals, Dispensaries and Nursing*, papers and discussions in the International Congress of Charities, Correction and Philanthropy (Johns Hopkins Press, 1894).—Hurd, with others, *The Institutional Care of the Insane in the United States and Canada* (Baltimore: Johns Hopkins Press, 1916), 4 vols.—Paul Jacobsohn, *Beiträge zur Geschichte des Krankencomferts* (Deutsche Krankenpflege Zeitung, 1898), in 4 parts; co-author, *Handbuch der Krankenversorgung und Krankenpflege* (Berlin, 1898).—Iwan Bloch, *Die geschichtliche Entwicklung der wissenschaftlichen Krankenpflege* (Berliner Klinik, 1899), pp. 1-30.

With the turn of the century came Anna Hamilton's *Considerations sur les infirmières des hôpitaux* (Montpellier, 1900), the remarkable thesis for the doctorate in medicine which was both a chronicle and creator of nursing history.—Rotha Mary Clay, *The Mediaeval Hospitals of England*



(London, 1909).—Leon Lallemand, *Histoire de la Charité* (Paris, 1912).—Karl Sudhoff, *Aus der Geschichte des Krankenhauswesens* (Jena, 1913).—Charles Arthur Mercier, *Leper Houses and Mediaeval Hospitals* (London, 1915), the FitzPatrick lectures, reprinted from *Glasgow Medical Journal*.—Edward Fletcher Stevens, *The American Hospital in the Twentieth Century* (New York, 1918; and later editions), by the architect who planned over one hundred hospitals and institutions including overseas hospitals during the first World War.—Genevieve Poyneer Hendricks, *Handbook of Social Resources of the United States* (American Red Cross, 1921).—Mary F. Raphael, *Romance of English Almshouses* (London, 1926).—Lists of the existing hospitals and training schools for nurses in the United States and Canada will be found in James Clark Fifield's *American & Canadian Hospitals* (Minneapolis, 1933; Chicago, 1937); and in the *American Medical Directory* (17th ed.: Chicago, 1942).

HOSPITAL SOCIAL SERVICE: Richard Clarke Cabot (1868-1939) introduced medical social service at the Massachusetts General Hospital (1905); the pioneer hospital social worker was the nurse Garnet Isabel Pelton; the second was the nurse Ida Maud Cannon, author of the standard volume, *Social Work in Hospitals* (1913). Doctor Cabot had previously published: *Social Service and the Art of Healing* (New York, 1909).—Hospital social service was introduced in England by Charles Stewart Loch (1849-1923), author of *Charity and Social Life* (London, 1910).—Helen Dendy Bosanquet, *Social Work in London* (London, 1914).

HOTEL-DIEU: *Archives de l'Hôtel-Dieu de Paris (1157-1300)* avec notice, appendice et table par Ernest Coyecque (Paris: Léon Brière, 1894).—Marcel Fosseyeux, *L'Hôtel-Dieu de Paris au xvii et au xviii siècle* (Paris, 1912).—Serviceable sketches in English by Ellen Newbold LaMotte, *Medical Library and Historical Journal* (Brooklyn), IV (1906), 225-40; James Spottiswood Taylor, *U. S. Naval Medical Bulletin* (Washington), XII (1918), 653-91; and Nutting-Dock, *History of Nursing*, I, 292-335; Dock, *ibid.*, III, 279-340 deals with the

Bourneville revolution in French hospitals: "So progresses the revolution, and over every hospital stand the glorious words: Liberté, Egalité, Fraternité."

HOUSING: M. J. Dunn, "Housing problem as it affects nursing activities," *Public Health Reports*, LV (1940), 1879-84.

HOWARD, JOHN (1726-90): The definitive bibliography (over 200 items) of the author of *Prisons* (Warrington, 1777) and *Lazarettos* (Warrington, 1789) by Leona Baumgartner, *John Howard: Hospital and Prison Reformer* (Johns Hopkins Press, 1939).

HOWE, LUCIEN (1848-1928): The physician who led the American crusade against hereditary blindness, and whose efforts (Howe Law, 1890) finally made it mandatory for attendants at childbirth to apply prophylactic treatment to the eyes of the newborn (Credé method, one drop of a two per cent solution of silver nitrate), thus saving countless infants from the gonorrheal curse of ophthalmia neonatorum. There are still too many children who are totally blind from this disease (even one child would be one too many), for the prevention is simple and absolute, but the picture is infinitely brighter than when Lucien Howe began his sight-saving campaign.—J. Herbert Waite in *Dictionary of American Biography* (1932), IX, 293.

HUXLEY, MARGARET (1853-1940): Sketch by Alice Reeves on the occasion of Miss Huxley receiving an honorary degree from the University of Dublin, *I.C.N. Official Organ of the International Council of Nurses* (1928), pp. 105-06.

INDIANS, NORTH AMERICAN: (Because of the number of names in this section, the arrangement is alphabetical; the same abbreviations are used as in INTERNATIONAL NURSING, and in addition: PHN for *Public Health Nurse* and USPH for *United States Public Health Reports*.—J. D. Aronson, "History of Disease Among Natives of Alaska," *Transactions and Studies of College of Physicians of Philadelphia*, VIII (1940), 27-34.—R. E. Boynton, "Nursing Service in Minnesota Among Chippewa Indians," *Child Health Bulletin*, II (1926), 19-22.—Harlow Brooks (Kishka Tanu),



"The Medicine of the American Indian," *Bulletin of New York Academy of Medicine*, V (1929), 509-37.—J. H. Crouch, "Trachoma Survey of 29 Public Schools on or near Indian Reservations in Montana," *USPH*, XLIV (1929), 637-45.—Estaiene M. De Peltquestangue, "Indian Nurses and Nursing Indians," *AJN* (1915), pp. 1021-27.—E. V. Duggan, "Health Work Among the Zuni Indians," *PHN*, XX (1928), 20-22.—Adelia Eggestine, "Public Health Nursing Among the Minnesota Indians," *Trained Nurse and Hospital Review*, LXXXIII (1929), 650-53.—La V. H. Fitzgerald, "Nursing Early Americans," *Pacific Coast Journal of Nursing*, XXV (1929), 530-32.—H. M. George, "Among Pueblo Indians of New Mexico," *PHN*, XVII (1925), 319-22.—Elinor D. Gregg, "Public Health Nursing in the Indian Service," *PHN*, XVIII (1926), 11-14; "Nursing Service to the North American Indian," *ICN* (1928), pp. 137-42; "Nursing Above the Arctic Circle," *AJN* (1936), pp. 128-34.—M. C. Guthrie, "The Health of the American Indian," *USPH*, XLIV (1929), 945-57.—F. L. Hoffman, "The Medical and Hospital Service of the United States Bureau of Indian Affairs," *Hospital Social Service*, XIX (1929), 544-52.—Susie A. Martinmas, "Nursing Among the Navajo Indians," *AJN* (1914), pp. 335-40.—R. R. Schaub, "Nursing Adventures in Rosebud Reservation," *PHN*, XIX (1927), 67-70.—A. B. Stoll, "The Public Health Nurse in Apacheland," *AJN* (1924), pp. 399-401.—Frances Waldorf, "Public Health Work on the Onondaga Indian Reservation," *PHN*, XVII (1925), 604-05.

INTERNATIONAL COUNCIL OF NURSES: Margaret Breay, *History of International Council of Nurses 1899-1925* (Geneva, 1931), with the collaboration of Mrs. Bedford Fenwick, founder of the International Council of Nurses.—The secretaries of the I.C.N. have been Lavinia Lloyd Dock, Christiane Reimann, Anna Schwarzenberg.

INTERNATIONAL NURSING: The International Council of Nurses expressed the hope that the time would come when nurses would say with Seneca (4 B.C.-A.D. 65): "I am not born for one corner; the whole world is

my native land." The democratic nobility of the nursing profession is dependent on its international spirit. Countries not found in the following list should be looked for under their alphabetical arrangement in this Bibliography. In this section the following abbreviations are used: *AJN*, *American Journal of Nursing*; *ICN*, *Official Organ of International Council of Nurses*; *INR*, *International Nursing Review*.

AUSTRALIA: Stella Pines, "The First Australian hospital," *INR* (1932), pp. 28-33.—BELGIUM: Cécile Mechelynck, "Public Health Nursing in Belgium," *ICN* (1926), pp. 263-77, tr. Christiane Reimann.—BRAZIL: Ethel Parsons, "Modern Nursing in Brazil," *ICN* (1927), pp. 292-302; Bertha L. Pullen, "Nursing in Brazil," *AJN* (1935), pp. 345-50.—BULGARIA: B. Christova and M. Tsakova, "Recent Developments in Public Health Nursing in Bulgaria," *INR* (1931), pp. 165-71.—CANADA: Charlotte McCloud, "District Nursing in Canada," *AJN* (1902), pp. 503-07.—CEYLON: Emilie Bond, "Nursing in Ceylon," *INR* (1933), pp. 22-25.—CHILE: Sara E. Adams, "A School for Nurses in Chile," *AJN* (1927), pp. 1029-30.—CHINA: Nina Diadamia Gage, "Stages of Nursing in China," *AJN* (1919), pp. 115-21.—CUBA: M. Eugénie Hibbard, "The Establishment of Schools for Nurses in Cuba," *AJN* (1902), pp. 985-91.—CZECHOSLOVAKIA: A. Mánková, "Brief Notes on the History of Nursing in Czechoslovakia," *INR* (1934), pp. 213-16; E. R. Tobolárová, "The Czech State School of Nursing," *INR* (1934), pp. 217-24.—EUROPE: Hazel Avis Goff, "Report of a Study of Public Health Nursing in Europe," *INR* (1934), pp. 31-45.—FIJI ISLANDS: May C. Anderson, "Nursing in Fiji," *AJN* (1902), pp. 1029-32.—FINLAND: Venny Snellman, "Development of Public Health Nursing in Finland," *ICN* (1929), pp. 147-53.—HAITI: Mercy M. Pidoux, "Nursing in Haiti," *INR* (1931), pp. 176-77, tr. from the French.—HOLLAND: Heleen A. Melk, "A Glimpse into Nursing and Nursing Education in Holland," *INR* (1932), pp. 185-88.—ICELAND: Sigridur Thorvaldsson, "Nursing in Iceland," *ICN* (1928), pp. 114-23.—INDIA: Ethel A. Watts, "The Training of Nurses in India," *INR* (1930), pp. 228-35.—IRAN: Lorraine Seltzer, "In Iran, the De-



velopment of a Nursing School in Shiraz," *AJN* (1941), pp. 520-25.—IRAQ: E. M. Lorraine, "Nursing in Basrah, Iraq," *INR* (1932), pp. 285-91.—IRELAND: E. Nellie Healy, "Nursing in Ireland," *INR* (1932), pp. 35-50.—ITALY: Grace Baxter, "Letters from Italy," *AJN* (1901), pp. 309-10, 447, 599-600, 761-62.—JAPAN: Iyo Araki, "Nursing in Japan," *AJN* (1928), pp. 1003-06; Seki Hora, "The First Visiting Nurses Association of Japan," *INR* (1932), pp. 594-98.—JAVA: A. H. M. Sterkman, "Development of Nursing in Java," *INR* (1930), pp. 334-41.—KOREA: Anne C. Jamme, "Severance Hospital, Seoul, Korea," *AJN* (1924), pp. 273-75.—LATVIA: Justine Kushke, "Development of Modern Nursing in Latvia," *ICN* (1929), pp. 134-41.—LUXEMBURG: Elisabeth Kauffeld, "Le nursing dans le grand-duché de Luxembourg," *INR* (1930), pp. 46-54, in French and English.—NEWFOUNDLAND: S. Leslie Bell, "Types of Pioneer Nursing in Canada and Newfoundland," *ICN* (1928), pp. 58-67.—NEW ZEALAND: Amelia Bagley, "Back Block Nursing in New Zealand," *ICN* (1926), pp. 168-71; Hester Maclean, *Nursing in New Zealand; History and Reminiscences* (Wellington, 1932).—PALESTINE: Alice L. Seligsberg (1873-1940), "A Modern Training School for Nurses in Jerusalem," *AJN* (1921), pp. 721-23.—PHILIPPINE ISLANDS: Socorro Salamanca, "Public Health Nursing in the Philippine Islands," *ICN* (1927), pp. 107-15.—PERU: Bertha Moeri, "A Nurse in Peru," *AJN* (1910), pp. 943-45; Rosa Larrabure, "The National School of Nursing in Peru," *INR* (1932), pp. 63-68.—POLAND: Marie Epstein, "The Professional Nurses School of the Dames of St. Vincent de Paul, Cracow," *INR* (1930), pp. 41-46.—RHODESIA: T. M. Rees, "Nursing Conditions in Southern Rhodesia," *INR* (1931), pp. 225-31.—RUMANIA: Zinuta de Costres, "Public Health Nursing in Roumania," *INR* (1933), pp. 18-20; Maria Pertia, "The School for Public Health Nurses in Cluj," *INR* (1934), pp. 62-70.—SAMOA: Bernice D. Mansfield, "Nursing in American Samoa," *INR* (1933), pp. 73-79.—SIAM: Alice Fitzgerald, "Nursing in Siam," *AJN* (1929), pp. 817-23; Princess Mandarobha, "Nursing in Siam," *INR* (1934), pp. 48-58.—SOUTH AFRICA: Louise L. Bennie, "The

Native Nurse in South Africa," *ICN* (1927), pp. 196-99.—SPAIN: Olga de Gunzburg de Bauer, "The St. Elizabeth of Hungary School of Nursing, Madrid," *INR* (1931), pp. 64-67; Teresa H. de Amézaga, "Visiting Nursing in Madrid," *INR* (1931), pp. 182-86.—SWEDEN: Marie Olsen, "Nursing in Sweden," *AJN* (1932), pp. 1059-62.—SYRIA: Sarah G. Shahla, "Nursing in Syria," *AJN* (1930), pp. 1515-18; Carolyn Ladd Widmer, "Nursing in Syria," *INR* (1936), pp. 12-27.—TURKEY: Paula Koch, "The Red Crescent School of Nursing in Constantinople," *ICN* (1928), pp. 127-29.—VENEZUELA: Katherine McLean Steele, "Mental Nursing in Venezuela," *AJN* (1941), pp. 157-60: "We were amazed to learn that, as late as 1934, patients in the Hospital Municipal Psiquiátrico were nude and in chains."—YUGOSLAVIA: "Nursing in Jugoslavia," *AJN* (1930), pp. 139-45.

The foregoing list is exceedingly fragmentary, for it omits more regions of the earth than it includes, but it is sufficiently representative to demonstrate the modern progress in the Nursing of the Nations.

IRENE, SISTER (1823-96): Among the descendants of Elizabeth Seton (1774-1821) was the Italian-born Robert Seton, the future dean of all the Monsignori in the United States; he regarded his grandmother as a saint, and, in his days as archbishop, lived near her tomb in Emmitsburg; in his prime he had edited, in two volumes, her memoirs, letters, and journals (1869). In that year, there appeared on the hospital horizon of New York, one of Mother Seton's daughters, the London-born Catherine Fitzgibbon, whose name in religion was Sister Irene. A task was imposed upon her: "Sister Irene was given a ten dollar bill and told to found a refuge for foundlings." It was a difficult task in the complicated era following the Civil War, but it never occurred to Sister Irene to hesitate.

The unclaimed waifs in New York were so numerous that it is odd the city never thought of preparing shelters for them. Policemen who picked up abandoned infants on their rounds, turned them over to all-embracing Bellevue, or to the paupers of the almshouses on Blackwell's Island. Policemen are realists, and they must have won-



dered if it would not have been a wiser and kinder act to have tapped these foundlings over the head with a night-stick, for they knew that, while many were consigned to such institutions, few came out alive. So Sister Irene established the New York Foundling Asylum (1869), and remained its guardian. She lived to see the property, founded on a ten-dollar bill, valued at a million dollars and honored around the world. For biographical sketches of Sister Irene, see under "Foundling Hospitals."

JACOBSON, PAUL: The semi-monthly German journal of nursing was established under the editorship of Eduard Dietrich and Paul Jacobsohn. To its pages an important historical monograph on the care of the sick was contributed by the co-editor Paul Jacobsohn, "Beiträge zur Geschichte des Krankencomforts" (Berlin: *Deutsche Krankenpflege Zeitung*, 1898) in 4 parts. In English, "Contributions to the history of nursing procedures," *International Nursing Review*, (1932), pp. 337-55, 474-84.

JARVIS HOSPITAL: Genevieve Miller, "Social Services in a Civil War Hospital in Baltimore," *Bulletin of the History of Medicine*, XVII (1945), 439-59; original documents of Sarah Spear and Ladies Aid Society which worked with sick and wounded Union soldiers; 12 full-page illustrations.

JOHNS HOPKINS HOSPITAL: Thomas Stephen Cullen, *Henry Mills Hurd* [1843-1927]: *First Superintendent of Johns Hopkins Hospital* (Baltimore, 1920).—Fabian Franklin's life of Daniel Coit Gilman (1910), Fielding Hudson Garrison's memoir of John Shaw Billings (1915), Harvey Cushing's life of William Osler (1925), the life of William Henry Welch by Simon Flexner and James Thomas Flexner (1941), and the recent writings of Alan Mason Chesney.—Files of the *Johns Hopkins Nurses Alumnae Magazine* (quarterly: first issue, December 1901).

JONES, AGNES ELIZABETH (1832-68): Florence Nightingale, "Una and the Lion," *Good Words* (1868), pp. 360-68: "I will, therefore, call her Una, if you please; for when her whole life and image rise before me, so far from thinking the story of Una and her lion a myth, I say here is Una in real flesh

and blood, Una and her paupers, far more untameable than lions."—*Memorials of Agnes Elizabeth Jones*, by her sister (London, 1871); Miss Nightingale's paper served as the Introduction, though without her authorization, as she considered the *Memorials*, which rapidly passed through several editions and were reprinted in America, "one-sided and morbid" (Cook's *Nightingale*, II, 446).—Centenary sketch by Lucy Ridgely Seymer, "Agnes Jones, 1832-1932," *International Nursing Review* (1933), pp. 43-51.

JONES, JOHN (fl. 1579): Brief sketch by Thompson Cooper, *Dictionary of National Biography* (1892), XXX, 122-23. John Jones, Welsh physician, was the author of treatises on balneology, translated a little Galen from the Latin translation, and wrote *The Arte and Science of preserving Bodie and Soule in Healthe, Wisedome, and Catholike Religion* (imprinted at London by Henrie Bynneman, 1579). This book should be reproduced in facsimile, as it is practically unobtainable, and is of interest as one of the earliest English works on child nursing and education. ("Monarkes have been marred by Nurses.") For reproduction of title-page and additional information, see Henry Schuman, *Medical and Scientific Books of 16th and 17th Century England* (New York, 1945; Catalogue 10).

KANSAS: *Lamps on the Prairie: a History of Nursing in Kansas* (Emporia, 1942), by Writers' Program of W.P.A. A passage on the good-neighbor nurse of the prairie is characteristic of this volume, the most graphic of the state histories of nursing: "There were usually two or three of these practical nurses in each community and they were usually mothers. Their children never knew at bedtime whether mother would be at home in the morning. Often as not the bobbing lanterns seen at night across pastures and down lanes were carried by these busy women, on their way to care for a chest cold that had suddenly 'taken worse,' or to answer the call of a woman whose child was choking with croup. There are many accounts of streams forded at flood on such errands, of storms faced on open fields before fences marked the route of

roads, and of snowdrifts waded without hesitation though they might conceal deep ravines—all to give help for which no pay was expected or received. So widespread was this neighborliness that the linchpins in the wagon wheel of newcomers had hardly ceased their creaking before inquiry was made on who in the neighborhood was 'good in case of sickness.' And naturally it was usually a woman who climbed down from the wagon to ask the question while she wiped the sweat from her forehead, smoothed back her hair, and slapped the dust from her slat sunbonnet."

Not for hire, but simply out of her desire to help, did a good-neighbor nurse mix a drop of laudanum with the white of egg for the summer complaints of babies, tie little bags of terrible-smelling asafetida around the necks of protesting children, apply a poultice of horseradish root to a painful swelling, and dip red flannel into hot turpentine for belly-cramps. As a rule she did not have to discourse on the value of sassafras tea for purifying the blood, or explain the virtues of sulphur-and-molasses in the spring for thinning the blood after the inactivity of winter, for that was common knowledge. She learned what to do for indolent burns and for non-healing infections; for the prevalent malaria she prescribed Ayer's "Ague Cure," or a favorite concoction of her own; if she was not too pious she recommended, when it was obtainable, the jug of bitters (quinine and whisky), and she applauded those dauntless souls who insisted in taking their "quinine straight," as much as would stay on the end of a jackknife.

LAW: Emanuel Hayt and Lillian Hayt: *Legal Guide for American Hospitals* (New York, 1940), aside from numerous references to nursing, chapter on "Nursing Law and the Hospital."

LAW, SALLIE CHAPMAN GORDON (1805-94): *Reminiscences of the War of the Sixties* (1892), by the "Mother of the Confederacy."—Armistead Churchill Gordon in *Dictionary of American Biography* (1933), XI, 42-43.

LIVERMORE, MARY ASHTON RICE (1821-1905): Her two autobiographies, *My Story of the War* (1888) and *The Story of My Life* (1897).—Elizabeth Donnan in *Dic-*

*tionary of American Biography* (1933), XI, 306-7.

LOBO, RACHEL HADDOCK (1891-1933): Director of the first school of nursing in Brazil, and editor of Brazil's first professional nursing magazine; sketch adapted from an address in Portuguese, *International Nursing Review* (1934), pp. 4-5.

LOCH, CATHERINE GRACE (1854-1904): Sir A. F. Bradshaw, *Catherine Grace Loch: A Memoir*, with an introduction by the Earl Roberts (London, 1905), based on her letters.

LONDON HOSPITAL: Founded (1740) by the surgeon John Harrison, its modernization was due to its matron, Eva Lückes (1854-1919), author of *Lectures on General Nursing*, delivered to the probationers of the London Hospital Training School for Nurses (1884), and *Hospital Sisters and Their Duties* (1888). The London Hospital is of special interest as the alma mater of Eva Lückes's pupil, Edith Cavell (1865-1915).—E. W. Morris, *A History of the London Hospital* (London, 1910); Sir William Goschen (chairman), *London Hospital Illustrated*, 200th Birthday Souvenir Edition (1940-41).

LOVERIDGE, EMILY LEMOINE (1860-1941): Meta Rutter Pennock, *Makers of Nursing History* (New York, 1940), p. 78; obituary in *Am. Jour. of Nursing* (1941), p. 738.

MACLEAN, HESTER: Sketch by T. H. A. Valentine in *International Nursing Review* (1932), pp. 419-22.

MANCE, JEANNE (1606-73): Joseph Kearney, *Jeanne Mance, or the Angel of the Colony, foundress of the Hôtel-Dieu, Montreal* (Montreal, 1931).

MANNERHEIM, SOPHIE (1863-1928): Sketch by Armi Hallsten-Kallia in *I.C.N. Official Organ of the International Council of Nurses* (1928), pp. 2-3, preceded by Baroness Mannerheim's farewell message.—Recent visitors to the hospitals of Helsinki find memorials and memories of Sophie Mannerheim.

MARYLAND: Excellent monograph by Helen C. Bartlett, *Twenty-fifth Anniversary of the Maryland State Nurses Association* (Baltimore, 1928).



MAXWELL, ANNA CAROLINE (1851-1929): Sketch in *Am. Jour. of Nursing* (1921), pp. 688-97.—Editorial: "The Anna Caroline Maxwell Hall," *ibid.* (1928), pp. 441-44, the nurses' home of the New York Medical Center.—See the paragraphs in the *Columbia Encyclopedia* (1935) and in *Webster's Biographical Dictionary* (1943).

McEVOY, FANNY WILDE: Charlotte Albina Aikens, "Christmas Appeal for a Pioneer Nurse," *Trained Nurse and Hospital Review* (1911), pp. 355-56. Fanny Wilde was a member of the first class trained in the Nightingale School of St. Thomas's Hospital, London; half a century later she was found destitute in Detroit, but, despite her eighty-one years burdened with poverty, the old nurse still had among her possessions her letter of acceptance as probationer (signed by the redoubtable matron, Mrs. S. E. Wardroper, on June 29, 1860), and a little brown teapot which was the remains of a set given her by Florence Nightingale when she went on her first term of night duty.

McISAAC, ISABEL (1858-1914): Tributes in *Am. Jour. of Nursing* (1914), pp. 6, 85-86, 91-103. Miss McIsaac: "Of all the lonely watchers of the night—sailors, sentries, light-keepers and shepherds—none keeps the solitary, anxious watch of the night nurse and the watching mother. There has never been anything quite like it since the world began, and no woman ever goes through it, who does not, all the rest of her life, carry a shadowy remote corner in her mind and heart, into which no one else may enter, nor does she ever look out into the night at a late hour and alone, that she does not think of those solitary watchers, in the great hospitals, in quiet city homes, in cottages and tenements, in remote villages and on lonely farms, and with a throb of sympathy pray for their guidance and safety."

MEDICAL COLLEGES: The connection between medical school, training school, and hospital, was inevitable, yet prolonged battles were fought to demonstrate the obvious. For list of medical schools in the United States, see the "Hospital Number" of the *Jour. American Medical Association* (March 25, 1944) and more detailed description "in Educational Number," *ibid.* (August 19, 1944).

MEDICAL LIBRARIES: E. G. Wigmore: "Responsibility of Medical Library to Nursing Profession," *Bulletin of Medical Library Association*, XXVIII (1939), 91-99.

MIDDLE AGES: Mélanie Lipsinka, *Histoire des femmes médecins* (Paris, 1900).—Rotha May Clay, *The Medieval Hospitals of England* (London, 1909).—Muriel Joy Hughes, *Women Healers in Medieval Life and Literature* (New York, 1943), chapter on "Medieval Nurses," and Appendix of names of women practitioners of the later Middle Ages (barbers, doctors, surgeons, empirics, midwives, nurses).

MINNEAPOLIS: Bertha Estelle Merrill, *The Trek from Yesterday: A History of Organized Nursing in Minneapolis, 1883-1936* (Minneapolis Nurses Association, 1944).

MINNIGERODE, LUCY (1871-1935): *Who's Who in America*, XVIII (1934-35); obituary in *American Journal of Nursing* (1935), pp. 499-500; Charles O. Paullin in *Dictionary of American Biography*, XXI, Supp. 1 (1944), 555-56.

MISSOURI: Louise Irby Trenholme: *History of Nursing in Missouri* (Columbia: Missouri State Nurses Association, 1926).

MONASTICISM: Pierre Hélyot (1660-1716) *Histoire des ordres monastiques* (1714-21), 8 vols., completed by Maximilien Bullot; the famous colored plates of the costumes of the orders are in the second edition of 1792.—M. A. R. Toker and Hope Malleon: *Handbook to Christian and Ecclesiastical Rome* (1900), 3 vols.—Francis Aidan Gasquet, *English Monastic Life* (1904).—Edward Cuthbert Butler, *Benedictine Monachism* (1919) and *Western Mysticism* (1922); this Irish authority, abbot of Downside Abbey, Bath (1906-22), wrote a valuable synopsis of the subject for the *Encyclopaedia Britannica* (1911), XVIII, 687-91; mutilated, and author's name omitted in later editions.—Of particular interest for women and nursing, Lina Eckenstein: *Woman Under Monasticism* (Cambridge, 1896) and Muriel Joy Hughes: *Women Healers in Medieval Life and Literature* (New York, 1943).

MONTANA: E. Augusta Ariss, *Historical Sketch of the Montana State Association* (Butte, Mont., 1936).

MOUNT SINAI HOSPITAL (NEW YORK): Abraham Jacobi, "The Historical Development of Modern Nursing"; address delivered at the first commencement of the Mount Sinai Training School for Nurses, May 12, 1883; published in the *Popular Scientific Monthly* (Oct., 1883) and included in *Collectanea Jacobi* (New York, 1909), VIII, 95-114.—Jane Benedict: *The Story of the First Fifty Years of the Mount Sinai Hospital, 1852-1902* (New York, 1944).—Files of *Journal of the Mount Sinai Hospital*.

MUNCK, CHARLOTTE (1876-1932): Memorial sketch by Inge Funding, tr. from the Danish, *International Nursing Review* (1932), pp. 417-19.

NAVY NURSE CORPS: J. Beatrice Bowman, "History of Nursing in the Navy," *Am. Jour. of Nursing* (1928), pp. 883-89.

NEGRO NURSES: Adah B. Thoms, *Pathfinders, a History of the Progress of Colored Graduate Nurses*; with biographies of many prominent nurses (New York, 1929).—There were 7,192 Negro nurses (graduates and students) in the United States (1940 Census); for distribution by state, see *Facts about Nursing* (Nursing Information Bureau, 1945), p. 11.

NEILL, GRACE (1846-1926): Agnes Bennett, "Grace Neill, the Grand Old Woman of New Zealand," *I.C.N. Official Organ of International Council of Nurses* (1927), pp. 79-81.

NEWARK BETH ISRAEL HOSPITAL: Charles Mortimer Robbins, "The Newark Beth Israel Hospital," *Medical Leaves* (Chicago), V (1943), 107-16; the Daughters of Israel Hospital Association (1900) converted an old frame building into the little hospital from which developed the imposing edifice of today.

NIGHTINGALE, FLORENCE (1820-1910): A complete list of Miss Nightingale's writings, the important writings about her, and list of authentic portraits, in Edward Tyas Cook, *Life of Florence Nightingale* (London, 1913), II, 437-69. Perhaps the most interesting review of this standard work was not by a reviewer, but by Violet Markham in a private letter to Sir Edward Cook. As

peppery as a letter by Florence herself, the following passages are characteristic: "What an intriguer too—her rigging of Royal Commissions from that back bedroom must have made Beatrice Webb green with envy. And that retreat to the back bedroom and the cutting adrift from her intolerable family, especially the intolerable sister. But what a life! Never have I read a book which brought home to me so fully the truth of Madame de Staël's words, Fame for a woman is splendid mourning. Men do achieve success and fame so much more easily than women. They don't have to retire to back bedrooms to do it. A famous man doesn't find his work incompatible with family and even social ties. But our women of genius—what tragic figures they are—Charlotte Brontë, George Eliot, Florence Nightingale! She must have been a very difficult woman to deal with, and I expect even her tiresome mother and sister had a bad time of it with her on occasions. What a down she has on marriage. I expect the dear darling nurses shook in their shoes when they fell away from grace into matrimony, and had to break the news to the dear mother! It is difficult to sum her up—she is so fine and in parts so repellent." For the complete letter, see J. Saxon Mills, *Sir Edward Cook* (London 1921), pp. 229-30.—George Macaulay Trevelyan: *British History in the Nineteenth Century* (1922), p. 307: "Whatever . . . anyone else may have got out of the Crimean War, England's gain from it was the life-work of this woman—an immense acquisition of moral territory, if all its secondary consequences and ramifications be followed out."—Ida Beatrice O'Malley, *Florence Nightingale, 1820-1856* (London, 1931). Cook's work (1913), its abridgment and revision by Miss Nightingale's cousin, Mrs. Vaughan Nash (1925), and the biography by Miss O'Malley (1931), are the official biographies of Florence Nightingale.

NORTH DAKOTA: *North Dakota State Nurses Association, 1912-1934*, booklet on the history of the state organization, with biographical sketches of the pioneers, including Emma Randall, one of the four nurses sent to America by Florence Nightingale;



like Bertha Erdmann, first president of the North Dakota State Nurses Association (1912), Emma Randall (Mrs. Lawrence) came to North Dakota from Minnesota.—Official bulletin: *The Prairie Rose*.

NOYES, CLARA DUTTON: Miss Noyes: "It must be written upon the pages of history for all time that our Red Cross nurses were prepared, that our soldiers were properly nursed" (1917).—*History of American Red Cross Nursing* (1922).—*Who's Who in America*, XVIII (1934-35), 1789.—Obituary in *Am. Jour. of Nursing* (1936), pp. 750-52.

NURSE'S AIDES: Katherine Tucker Orbison: *A Handbook for Nurse's Aides* (New York, 1943); so great was the demand for nurse's aides during the war that within a short time the book reached a fourth large printing (1944).

NYLANDER, ELLEN (1865-1931): An appreciation by Olga Lackström in *International Nursing Review* (1931), pp. 481-83.

OWENS-ADAIR, BETHENIA: Nancy Wilson Ross, *Westward the Women* (New York, 1944).

PASTON LETTERS: The voluminous correspondence and other documents of the Paston family, an egoistic, self-seeking family which for generations engaged in litigation and armed conflict with its neighbors; the neighbors were no better. The letters have become indispensable source-material of English behavior, customs, laws, manners and morals (15th-16th cent.). In this period of pestilence and medical ignorance, the Paston women functioned as the pharmacists, physicians, and nurses of the family; several of the letters deal with drugs and sickness. Margery had the recipe for a wonderful plaster which her husband recommended to his best friends (Letter No. 898); Margery Paston likewise had an exceedingly low opinion of the medical profession of her time.—Definitive edition by James Gairdner (1828-1912): *The Paston Letters, 1422-1509* (London, 1904), 4 vols.—See references and extracts in Muriel Joy Hughes: *Women Healers in Medieval Life and Literature* (New York, 1943).

PEKING: *Dedication of Peking Union Medical College*, 1921 (Peking, 1922); elaborate

folio of over 400 pages; established by the Rockefeller Foundation, the formal opening of the buildings and hospital of the college was an epoch in the national health of China; white-capped nurses marched in the academic procession, and the celebration volume contains several illustrations of the nursing aspects.—K. Chimin-Wong and Wu Lien-Teh, *History of Chinese Medicine* (Tientsin, 1932); numerous references to medicine and nursing in Peking.—Sidney Davis Gamble, *How Chinese Families Live in Peking* (New York, 1933).—Margaret R. Wyne and Wang Hsu-Ying, "Health Nursing in Peking," *American Journal of Nursing* (1940), pp. 1107-14.

PENLAND, ANNE: The source of the episode related in the text is *History of American Red Cross Nursing* (1922), pp. 454-55.

PENNSYLVANIA: Mary Virginia Stephenson, *The First Fifty Years of the Training School for Nurses of the Hospital of the University of Pennsylvania* (Philadelphia, 1940).—Roberta Mayhew West, *History of Nursing in Pennsylvania* (Pennsylvania State Nurses Association).

POST-GRADUATE HOSPITAL: Lena Dufton, *History of Nursing at the New York Post-Graduate Medical School and Hospital* (The Alumnae Association, 1944).

PRESBYTERIAN HOSPITAL: Founded by James Lenox (1868), bibliophile (Lenox Library) and philanthropist, "for the poor of New York City without regard to race, creed, or color."—David Bryson Delavan, *Early Days of the Presbyterian Hospital of the City of New York* (privately printed, 1926).—Eleanor Lee, *History of the School of Nursing of the Presbyterian Hospital* (1942).

PRIVATE DUTY NURSING: Margaret Ross, *Memoirs of a Private Duty Nurse* (Glasgow, 1938).—Cecilia L. Schulz, *How to Enjoy Ill Health* (New York, 1938).

PSYCHIATRY: A. E. Bennett, A. B. Purdy and H. M. Jordan, "History and Development of Modern Psychiatric Nursing," *Diseases of the Nervous System* (Chicago, 1940), I, 265-72.

PUSSIN, JOAN-BAPTISTE (1756-18—?): The Paris thesis of Louis-René Semelaigne, *Philippe Pinel et son oeuvre au point de vue*

*de la médecine mentale* (1888).—Elizabeth Seelye Bixler, "A forerunner of psychiatric nursing, Joan-Baptiste Pussin," *Annals of Medical History* (1936), pp. 518-19.—For a translation of Pinel's introduction to the first edition of his *Traité*, in which Pussin is mentioned, see Gregory Zilboorg, *A History of Medical Psychology* (New York, 1941), pp. 329-41.

RESIDENCE HALLS: Helen Quien Stewart, *Some Social Aspects of Residence Halls for College Women* (New York, 1942).

RICHARDS, ELLEN HENRIETTA (1842-1911): First woman graduate of the Massachusetts Institute of Technology (1873), where she married one of the professors, and remained for nearly forty years as a distinguished worker in sanitary chemistry; founder of the American Association of University Women (1881) and of the American Home Economics Association (1899).—Marion Talbot in *Dictionary of American Biography* (1935), XV, 553-54: "Her leadership in the home economics movement was her great achievement."

RICHARDS, LINDA (1841-1930): Her autobiography, *Reminiscences of Linda Richards, America's First Trained Nurse* (Boston, 1911); Agnes B. Joynes, "Linda Richards as I Knew Her," *Am. Jour. of Nursing* (1920), pp. 72-77; "Linda Richards Centennial," *ibid.* (1941), pp. 1101-02; Centennial booklet by Isabelle W. Sloan (Boston, 1941).

RIDDLE, ESTELLE GENEVA MASSEY: "Alma C. Haupt: A Pioneer in Negro Nursing," *Am. Jour. of Nursing* (1935), pp. 857-59.

RUSSIA: Russia (Rossiya), since its emergence as the Union of Socialist Soviet Republics (USSR), has been more furiously hated and rabidly maligned by the witch-hunters of our age than any other country on earth. The false statements constantly appearing in certain American newspapers may be matched by the equally inexcusable pronouncement of Alexandra Romanoff, "Russian Nursing and Nurses," *I.C.N. Official Organ of the International Council of Nurses* (1926), pp. 32-39, 117-23: "The communistic experience has not only exterminated and killed

millions, it has ruined the health of the entire population of Russia." The truth is, that from the standpoint of the health and welfare of the entire population of a country, the program of the new Russia, much of which has already been fulfilled, is the brightest star on the dark horizon of humanity.—Maynard L. Carter, "The Nurse and Aviation," *International Nursing Review* (1936), pp. 118-23: "Probably in no other country has the nurse and samaritane come to play such a rôle in aviation as in Russia. Not only do they form part of the personnel of the air ambulance, but members have been trained as parachutists, and are ready to render first aid in cases where there are no other means of reaching the injured." The medical airplanes or air ambulances of the USSR are complete miniature hospitals.—Hilary M. Blair-Fish, "Nineteen Nurses Visit Russia," *International Nursing Review* (1936), pp. 158-67; also in *Birmingham Medical Review* (1936), pp. 113-23.—The following books, unless otherwise stated, were published in New York. Anna J. Haines, *Health Work in Soviet Russia* (1928): An American nurse's first-hand study, with Preface by Lillian D. Wald.—Jessica Smith, *Woman in Soviet Russia* (1928); Alice Withrow Field, *Protection of Women and Children in Soviet Russia* (1932).—Thelma Nurenberg, *This New Red Freedom* (1932).—Significant study by the William H. Welch professor of history of medicine at Johns Hopkins University, Henry Ernest Sigerist, *Socialized Medicine in the Soviet Union* (1937).—Articles and books by Manya Gordon, Ella Winter, and Anna Louise Strong, founder of *Moscow Daily News* (1930), the first English newspaper in Russia.—Two interesting and useful guidebooks to the Soviet Union, in the English language, were edited by A. Radó (printed in Germany, 1928) and A. L. Block (Moscow, 1932).

SAINTS: Alban Butler (1711-73), *Lives of the Saints* (1756-59), an imposing eighteenth-century contribution to hagiography, describing over 1,600 saints. Sketches of the saints are alphabetically available in the *Catholic Encyclopedia* (New York, 1907-12; 15 vols.).



SCHUYLER, LOUISA LEE (1837-1926): For the Woman's Central Association of Relief, see Linus Pierpont Brockett and Mary Vaughan, *Woman's Work in the Civil War* (Philadelphia, 1867), pp. 527-39.—For the training school of Bellevue Hospital, Elizabeth Christophers Hobson: *Recollections of a Happy Life* (New York, 1916), pp. 77-114, which Miss Schuyler edited.—Annie Warburton Goodrich in *American Journal of Nursing* (1915), pp. 1079-82.—Francis Greenwood Peabody: *Reminiscences of Present-Day Saints* (1927).—William Bristol Shaw in *Dictionary of American Biography* (1935), XVI, 474-75.—Reports of State Charities Aid Association; and of the National Society for the Prevention of Blindness.

SCOVIL, ELISABETH ROBINSON (1849-1934): "Personal recollections of Florence Nightingale," *Am. Jour. of Nursing* (1911), pp. 365-68, followed by facsimiles (8 pp.) of Nightingale letters; two subsequent articles by Miss Scovil on Miss Nightingale, *ibid.* (1913), pp. 28-33; (1914), pp. 13-18.—Obituary, *ibid.* (1935), pp. 91-92.

SETON, ELIZABETH ANN BAYLEY (1774-1821): On the centennial of the founding of the Sisters of Charity in America, the Cincinnati sisters published a brochure, *Mother Seton* (Mount St. Joseph-on-the-Ohio, 1909), urging sainthood for the foundress.—The article by Joseph B. Code in *Dictionary of American Biography* (1935), XVI, 596-97, contains the pertinent references.

SIEVEKING, AMALIE (1794-1859): *Denkwürdigkeiten aus dem Leben von Amalie Sieveking* (Hamburg, 1860); Elisabeth Haupt, *Amalie Sieveking* (Berlin-Spandau, 1933).

SINAI HOSPITAL OF BALTIMORE: Herman Seidel: "Sinai Hospital of Baltimore," *Medical Leaves* (Chicago, 1942), IV, 162-77; cornerstone laid June 25, 1866.

SNIVELY, MARY AGNES (1848-1933): Janes E. Brown, "Obituary of the Mother of Nurses in Canada," *International Nursing Review* (1934), pp. 1-3.

SOLOMON ISLANDS: Mary H. Staats, "Navy Nurses in the Solomons," *Am. Jour. of*

*Nursing* (1945), p. 534; "Chameleons ran across our feet, to the utter delight of convalescing patients."

SOLOMONS, ADOLPHUS SIMEON (1826-1910): Organizing the first training school for nurses in the nation's capital and the Washington Night Lodging-House Association, directing the Providence Hospital and the Columbia Hospital for Women, founding the Garfield Memorial Hospital, and planting the seeds which produced the Mount Sinai Hospital and the Montefiore Hospital in New York, were part of the remarkable career of this man in whose home were held the initial meeting of the Associated Charities and the first meeting of the American Red Cross (a portrait of Solomons is included in Clara Barton's *History of the Red Cross* (facing p. 54)).—David DeSola Pool in *Dictionary of American Biography* (1935), XVII, 393-94.

SOPHIAHEMMET: Lillian D. Wald, "The Sophiahemmet in Stockholm," *American Journal of Nursing* (1900), pp. 180-82.—Nearly forty years later (1938), an American physician came to the Sophiahemmet: in the garden he saw two frail old women, and was told they were two of the original sisters of Sweden's nursing foundation; within the halls of the building, he saw graduate nurses going about their tasks; entering a classroom, he was introduced to the youthful apple-cheeked probationers who rose in graceful unison to welcome the stranger from across the seas. Thus, within a single hour, the foreign visitor saw the past, the present, and the future, of Swedish nursing.

SPANISH-AMERICAN WAR: Nicholas Senn (1844-1908), *Medico-Surgical Aspects of the Spanish-American War* (American Medical Association, 1900); chapters on nursing.

STRACHEY, LYTTON (1880-1932): In *Eminent Victorians*, with the caustic and brilliant chapter on Florence Nightingale (1918), in *Queen Victoria* (1921), and in *Elizabeth and Essex* (1928), Lytton Strachey drew unforgettable portraits of England's three most famous women. The author's untimely death was one of the tragedies of modern literature.

SUDAN, THE: E. Hills Young, "Nursing in the Sudan," *International Nursing Review* (1932), pp. 179-83.

SUDHOFF, KARL (1853-1938): *Aus der Geschichte des Krankenhauswesens* (Jena, 1913).

SWEDISH RED CROSS: Folke Bernadotte, *The Curtain Falls: Last Days of the Third Reich*; tr. from the Swedish by Eric Lewenhaupt (New York, 1945).

SZOLD, HENRIETTA (1860-1935): Eloise Lownsbury, *Saints and Rebels* (1937), pp. 1-45; Marvin Lowenthal, *Henrietta Szold: Life and Letters* (New York, 1942), and his obituary article in *The Nation*, CLX (1935), 243-44.—Issue of *Harofé Haivri* (Hebrew Medical Journal) dedicated to Henrietta Szold (New York, 1945).—Files of *Hadassah Newsletter*.

TEACHERS COLLEGE: Mary Adelaide Nutting, "Twenty Years of Nursing in Teachers College" (address delivered in 1920; included in *A Sound Economic Basis for Schools of Nursing*, 1926): "Two venturesome students formed our first class and I recall vividly coming up from Baltimore that first year to lecture solemnly to them on the History of Nursing and being much impressed by their enthusiasm."—Isabel Maitland Stewart: "Three Decades of Nursing Education in Teachers College, Columbia University," *Methods and Problems of Medical Education* (21st series; Rockefeller Foundation, 1932), pp. 37-54.—Alumnae celebration of the fortieth anniversary of nursing education in Teachers College, *Nursing Education Bulletin* (Feb. 1940), pp. 1-84.—See also James Earl Russell, *The Founding of Teachers College* (1937).

THOMAS OF AQUINO: Thomas Aquinas (1225-74), whose Christianization of Aristotelian-Herbraic-Islamic formulae was the apotheosis of scholasticism.—Sister M. Isabel Fitzgerald, *The Philosophy of St. Thomas of Aquin in Relation to the Spiritual Aspects of Nursing* (Catholic University of America, 1938).

THOMAS OF CELANO: Companion of Francis and his earliest biographer, Thomas Celano wrote the two official lives of the saint, *First*

*Legend* (1229) and *Second Legend* (1247), followed by the *Legend of St. Clare* (1255). See the English translation by A. G. Ferrers Howell, *Lives of S. Francis of Assisi* by Brother Thomas of Celano (London, 1908).

THOMS: Sketch of the distinguished colored nurse, Adah B. Thoms, in Meta Rutter Pennock, *Makers of Nursing History* (New York, 1940), pp. 31-32; obituary in *Am. Jour. of Nursing* (1943), p. 419.

TODD, ROBERT BENTLEY (1809-60): He opened King's College Hospital in an abandoned poorhouse (1840); interested in hospital nursing, he established the sisterhood of St. John's House (1848), in connection with which is found the earliest English reference to "visiting nursing"; he died in his consulting room, a few hours after seeing his last patient.—Sketch in *Dictionary of National Biography* (1898), LVI, 432-34: "The circumstances of his death are touchingly told by Thackeray in the Roundabout papers."

TOOLEY, SARAH: English authoress, daughter of Thomas Southall and wife of the Reverend George Walter Tooley. Mrs. Tooley had a flair for literary research and was willing to travel and consult numerous individuals in the furtherance of her work. Although various biographical sketches of the creator of modern nursing had already appeared, Mrs. Tooley wrote the first constructive *Life of Florence Nightingale* (London, 1904); issued during the lifetime of the heroine, several years before the official biography, it was a creditable performance. Mrs. Tooley had no contact with Miss Nightingale herself, but she read the available literature, collected illustrations from various sources, spent several months in the vicinity of Miss Nightingale's early homes, and interviewed people who were acquainted with her, including the Crimean survivors.

The success of the Nightingale biography prepared the way for a more ambitious undertaking, and Mrs. Tooley was soon gathering data for the *History of Nursing in the British Empire* (London, 1906). Although she was not a nurse, and had no connection with nursing, this too was a meritorious achievement, and the reader will agree with the authoress when she says: "No pains have



been spared to obtain accurate information, and in many cases the archives of the various hospitals and nursing institutions have been consulted." Unfortunately, Mrs. Tooley labored under the handicap of being too early: she did not have Nutting-Dock (1907-12) to guide her. In describing contemporary nurses, Mrs. Tooley gave prominence to reactionaries who are now forgotten or are remembered mainly for their mischievous activities, while she practically ignored Mrs. Bedford Fenwick and her associates, whose names survive as the leaders of the post-Nightingale revolution which brought about higher educational standards, and the self-organization and state registration of nurses. Mrs. Tooley remarked: "The history of the controversy can scarcely be written while bullets fly and swords are unsheathed. A few years hence, when a treaty of peace has been signed, and the vanquished have gracefully capitulated to the voice of the majority, the story of the struggle for registration will be told more fittingly." All this is true, but, as is obvious from her text and illustrations, Mrs. Tooley made the mistake of sympathizing with the wrong side. The result is a book often out of focus, whose interest lies in the grace of its literary style, and in the animation of its first-hand information.

TORONTO: Lina Lavanche Rogers, "School Nursing in Toronto, Canada," *Am. Jour. of Nursing* (1911), pp. 19-22, 105-10, 206-09, 303-17.

TSCHERNING, HENNY SCHULTZ (1853-1932): Memorial sketch by Cecelie Lütken; tr. from the Danish, *International Nursing Review* (1932), pp. 415-17.

TUBERCULOSIS: Ruth Brewster Sherman, "Baltimore's Work in Tuberculosis," *Am. Jour. of Nursing* (1901), 626-30; Elma Rood, *Tuberculosis Education* (Madison College, Tenn., 1936).

TULSA: Fred Severs Clinton, "First Hospitals in Tulsa," *Chronicles of Oklahoma* (1944); reprint of 28 pp.; and his "Beginnings of the Oklahoma State Hospital Association," *ibid.*, XXII, 338-53.

UNIFORM: "Why a Cap?", *Am. Jour. of Nursing* (1940), pp. 384-87; 12 illustrations.—"The Student Nurse's Uniform,"

*ibid.* (1940), pp. 1204-11; illustrated study based on data furnished by 284 superintendents of nursing.

UNITED STATES: Louise Oates, "Historical Sources of Early Colonial and Revolutionary Care of the Sick: Bibliography of 40 typed pages, bound with Extracts, from the *New England Register* (1652), relating to Nurses" (in the Mary Adelaide Nutting Historical Nursing Collection, Teachers College, Columbia University), also by Louise Oates, "Civil War Nurses," *Am. Jour. of Nursing* (1928), 207-12; bibliography.—J. S. Billings and H. M. Hurd, see under "Hospitals."—*Woman's Work in America* (New York, 1891), ed. Annie Nathan Meyer, founder of Barnard College (1889) and author of *Barnard Beginnings* (1935).—Autobiography of Elizabeth Blackwell, *Pioneer Work in Opening the Medical Profession to Women* (London, 1895), and of Marie Elisabeth Zakrzewska, *A Woman's Quest* (New York, 1924), ed. Agnes Caecilia Viator.—Josephine Goldmark, *Nursing and Nursing Education in the United States* (1923); described by Miss Nutting as "by far the most important recent event in nursing," and as "an event of the first magnitude for us," in *A Sound Economic Basis for Schools of Nursing*, pp. 283, 335.—Ann Doyle, "Nursing by religious orders in the United States," *Am. Jour. of Nursing* (1929), pp. 775-86, 959-69, 1085-95, 1197-1207, 1331-43, 1466-84.—Indispensable for nursing educators, *A Curriculum Guide for Schools of Nursing* (National League of Nursing Education, 1917-37); the latest edition, an octavo of 700 pages, contains extensive lists of suggested references.—John Steinbeck, *The Grapes of Wrath* (1939); in this powerfully sordid epic of the migrant people of our country, there are occasional glimpses of the useful work of the "nurse woman," but the real heroine is the American woman typified in the unforgettable Ma.—Isabel Maitland Stewart, *The Education of Nurses* (1943), beautifully dedicated to the Misses Nutting and Dock.

UNITED STATES SANITARY COMMISSION: By the tenth provost of the University of Pennsylvania (*Reminiscences of a Provost, 1866-80*), Charles Janeway Stillé, *History of the*



*United States Sanitary Commission* (Philadelphia, 1866), a large and stately quarto (125 copies printed); authoritative but lopsided, since it practically ignored woman's outstanding share in the achievements of the Sanitary Commission.—For the other side of the picture, see Marjorie Barstow Greenbie, *Lincoln's Daughters of Mercy* (New York, 1944).

UNIVERSITY COLLEGE HOSPITAL: Originated at George Street, Euston Square, London (1828).—Newton H. Nixon, *North London or the University College Hospital* (1882).

VENEREAL DISEASE: Claude Connor Pierce, "The Nurse as a Factor in the Prevention and Control of Venereal Disease," *Am. Jour. of Nursing* (1919), pp. 923-30.

VERMONT: *We Who Serve: A Story of Nursing in Vermont* (Vermont State Nurses Association, 1941).

VINCENT DE PAUL (1576-1660): His first biography, Louis Abelly, *Vie du Vénérable Serviteur de Dieu, Vincent de Paul* (1664), was prepared by his mission priests, and is available in modernized editions. Among numerous recent lives are those by Emmanuel de Broglie (tr. Mildred Partridge, 1898), James Adderley (1901), Ella K. Sanders (1913), and Henri Lavedan (tr. Helen Younger Chase, 1929).—Dissertation by Cyprian William Emanuel: *Charities of St. Vincent de Paul* (Catholic University of America, 1923); considerable material on nursing.—Sketches by James Joseph Walsh, *Those Splendid Priests* (1926); Henri Huvelin (1838-1910) *Some Spiritual Guides of the Seventeenth Century* (tr. Joseph Leonard, 1927); and Eloise Lownsbery, *Saints and Rebels* (1937).

VIRCHOW, RUDOLF (1821-1902): The founder of cellular pathology included original studies on the history of hospitals and nursing in the second volume of his collected essays on public medicine and epidemics: *Gesammelte Abhandlungen aus dem Gebiete der öffentlichen Medizin und der Seuchenlehre* (Berlin: August Hirschwald, 1879).

VIRGINIA: Wyndham Bolling Blanton, *Medicine in Virginia in the Seventeenth Century*

(1930); *Medicine in Virginia in the Eighteenth Century* (1931); *Medicine in Virginia in the Nineteenth Century* (1933), all published in Richmond; these excellent volumes, based on the sources, contain considerable material on nursing.—It was winter when the flagship *Sarah Constant*, under command of Captain Christopher Newport, and her sister ships *Godspeed* and *Discovery* sailed down the Thames, out to sea; in the following spring these ships were moored to trees in the marshes of Jamestown in Virginia. A hundred men and boys pushed ashore in the wilderness; some dug holes for themselves in the ground, and others built sedge-covered huts of earth. Thus was founded (1607) the first permanent English colony in America. No one knew what had happened in the intervening years to Virginia Dare. In this cradle of America, representative government and Negro slavery were born in the same year (1619). It was only half a community, and for years the Colonists yearned in vain for what they wanted most: finally there came a tide which brought the indispensable cargo (1620). From every corner of the *Jonathan* and the *London Merchant*, amid eager cheering and welcoming laughter, bustled and tumbled the women. These maids became the mothers of Virginia, and the Colony was complete.

With the coming of the women, morality became one of the problems of the Colony. The successful surgeon, John Holloway, was obliged to pay two hundred pounds of tobacco for the "sin of fornication." The wife of another surgeon, James Taylor, sued for a separation, permission to live with her mother, and a considerable maintenance, because her husband "hath kept a Whore in the house ever since he married her." The midwife Dorothea Bullock, going out on her first case, delivered Ann Roberts of an illegitimate child. Elizabeth Hollaway, servant of the physician Daniel Parke, gave birth to a bastard child, for which offense she received ten lashes on her bare back. Several servant girls were whipped for bastardy, and some were hanged for infanticide. It was an epitome of the history of any normal human community under the conventional code of sexual ethics.



In a primitive community, the people do not pamper themselves: they treat their complaints with home remedies, supplemented by the ever-ready advice of the neighbors. The doctor is sent for only in an emergency, and the call for a nurse is usually a prelude to the end. In Colonial Virginia the majority of the nurses were male attendants, but in time women took up this work. When woman first arrived in the Colony, she was a prize: she was at once seized as wife; and the days of her widowhood were brief. Women would marry a second husband before the will of the first was probated, and it did not excite surprise if on the same day a widow wept at the funeral of her first spouse and smiled at her nuptials with an impatient bridegroom. The laws of biology outrank those of elected legislators, and this is nature's method in new communities. When women became numerous in the Colony, some remained spinsters, and some widows; some practiced the oldest profession for a living. Still others became nurses.

The women who became nurses had no training in the recognition of disease or in its treatment. In the absence of hospitals, the patient was often hospitalized in the home of the physician or the nurse. The old woman sat in a chair by the bedside, prepared the patient's food, gave him his draughts, washed his linen; kept note of what she spent on candles, sugar, rum, strong beer; shrouded the body and furnished the coffin; provided refreshment and entertainment to the guests who attended the funeral; and, in making up her account with the deceased, she charged for time and trouble. The names of the early Virginia nurses, male and female, usually come to light in connection with legacies. For example, John Lacey (1688) bequeathed his estate, aside from a couple of cows, to "Mary Cawley and Agnes Rogers, two persons that I have made choice of to look after me in the time of my sickness." Nursing in the Colony duplicated nursing in the Mother Country: paid nursing was the province of the dregs of women, pushed to an unhonored occupation by the compelling hand of poverty.

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